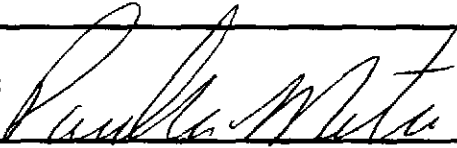


No. W 122887	Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2015		2. Registered Agent and Office (NOT A P.O. BOX) PAUL VAN METRE 399 E BEACON LIGHT RD EAGLE ID 83616																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. VAN METRE MACHINE L.L.C DEANNA VAN METRE 399 E BEACON LIGHT RD EAGLE ID 83616		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>PAUL VAN METRE</td> <td>399 E. BEACON LIGHT RD.</td> <td>EAGLE</td> <td>ID</td> <td>USA</td> <td>83616</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>DEANNA VAN METRE</td> <td>399 E. BEACON LIGHT RD.</td> <td>EAGLE</td> <td>ID</td> <td>USA</td> <td>83616</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	PAUL VAN METRE	399 E. BEACON LIGHT RD.	EAGLE	ID	USA	83616	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	DEANNA VAN METRE	399 E. BEACON LIGHT RD.	EAGLE	ID	USA	83616	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 122887 </div>		6. Signature:  <hr/> Name (type or print): <u>PAUL VAN METRE</u> <div style="float: right; text-align: right;"> Date: <u>10-22-15</u> Title: <u>MANAGER</u> </div>																																				

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