Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone:(503)986-2200
www.filinginoregon.com

Registry Number: 203513-91
Date of Organization: 02/25/2004
Type: DOMESTIC LIMITED LIABILITY COMPANY

460 13 200

FILED

NOV 07 2012

OREGON
SECRETARY OF STATE

RE: OTRA, LLC

APPLICATION FOR REINSTATEMENT/REACTIVATION

Please complete and return this letter and any enclosed documents for filing the requested reinstatement/reactivation.

Submit $300 for the required fees.

The above entity hereby requests to be active on the records of the Corporation Division. The effective date of administrative dissolution is 04/29/2011

The reason(s) for administrative dissolution has been eliminated or did not exist.

By :_____ Date :10/31/12
(Authorized Signature)

Any fees submitted with this document are non refundable and will be held for 45 days. If the document is returned for filing within 45 days no additional fees will be due unless otherwise stated in this letter.

Business Registry
Corporation Division
(503) 986-2200

OTRA, LLC

20351391-13888624 REIANA

Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone:(503)986-2200

REINSTATEMENT ANNUAL REPORT
Registry Number: 203513-91
Date of Organization: 02/25/2004

Type: DOMESTIC LIMITED LIABILITY COMPANY

www.filinginoregon.com

203513-91

OTRA, LLC
MATTOON LAW PC
4500 SW KRUSE WAY STE 100
LAKE OSWEGO OR 97035

FILED

NOV 07 2012

OREGON
SECRETARY OF STATE

Name of Domestic Limited Liability Company
OTRA, LLC
Jurisdiction: OREGON

The following information is required by statute. Please complete the entire form.

Registered Agent
MATTOON LAW, P.C.
4500 SW KRUSE WAY STE 100
LAKE OSWEGO OR 97035

If the Registered Agent has changed,
the new agent has consented to the appointment.
Oregon street address required.

1) Type of Business

2) Principal Place of Business (Address,city,state,zip)
4570 SW LOMBARD
PO BOX 629
BEAVERTON OR 97075

3) Mailing Address (Address,city,state,zip)
MATTOON LAW PC
4500 SW KRUSE WAY STE 100
LAKE OSWEGO OR 97035

4) ☒ **Member or** ☐ **Manager**(Name&Address)
TODD M MITCHELL
18940 SW SAMMY DR
ALOHA OR 97006

5) ☒ **Member or** ☐ **Manager** (Name&Address)
RANDY G KAISER
PO BOX 629
BEAVERTON OR 97075

6) Signature

8) Date 10/31/12

Make check payable to "Corporation Division" and mail completed form with payment to Secretary of State, Corporation Division, 255 Capitol ST NE Suite 151,Salem, OR 97310
Note: Filing fees may be paid with VISA or MasterCard.
Submit the card number and expiration date on a separate page for your protection.

ANRPF1-
10/29/12