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BUSINESS REG \$200.00
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Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

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

Registry Number: 302462-92
Date of Organization: 07/28/2005
Type: DOMESTIC LIMITED LIABILITY COMPANY

FILED

RE: TEVCO, LLC

DEC 05 2013

APPLICATION FOR REINSTATEMENT/REACTIVATION

**OREGON
SECRETARY OF STATE**

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

Submit \$200 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 09/27/2013

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

By: Paul Vettes Date: 12/5/13
(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

TEVCO, LLC



30246292-14798200

REIANA



Secretary of State
Corporation Division
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Salem, OR 97310-1327

Phone: (503) 986-2200
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REINSTATEMENT ANNUAL REPORT
Registry Number: 302462-92
Date of Organization: 07/28/2005

Type: DOMESTIC LIMITED LIABILITY COMPANY

TEVCO, LLC
8372 ENCHANTED WAY SE
TURNER OR 97392

Name of Domestic Limited Liability Company

TEVCO, LLC

Jurisdiction: OREGON

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

Registered Agent

HOWARD E SPEER
975 OAK ST STE 700
EUGENE OR 97401

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)

8372 ENCHANTED WAY SE
TURNER OR 97392

3) Mailing Address (Address,city,state,zip)

8372 ENCHANTED WAY SE
TURNER OR 97392

4) Member or Manager (Name&Address)

PAUL M VETTRUS AND THOMAS M VETTRUS ...
ANNA H VETTRUS REVOCABLE TRUST
8372 ENCHANTED WAY SE
TURNER OR 97392

5) Member or Manager (Name&Address)

PAUL M VETTRUS TRUSTEE OF
PAUL M VETTRUS REVOCABLE TRUST
8372 ENCHANTED WAY SE
TURNER OR 97392

6) Signature

Paul Vetrus

7) Printed Name

Paul Vetrus

8) Date

12 / 5 / 13

9) Daytime Phone Number

503 363 3591

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-
12/05/13