

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

Phone: (503)986-2200 Fax: (503)378-4381 www.filinginoregon.com Registry Number: 111855-19
Date of Incorporation: 09/19/1975

Type: DOMESTIC BUSINESS CORPORATION

Rotch 723 #37 4255

RE: MT. HOOD MOTORS, INC.

FILED

APPLICATION FOR REINSTATEMENT/REACTIVATION

JUN 2 5 2009 OREGON

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

SECRETARY OF STATE

Submit \$250 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 11/18/2005

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

By: XChad D 3heh Date: 10 109 (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

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

Phone:(503)986-2200

REINSTATEMENT ANNUAL REPORT Registry Number: 111855-19 Date of Incorporation: 09/19/1975 1185519



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MT. HOOD MOTORS, INC. %TEVRIS WYERS PO BOX 417 HOOD RIVER OR 97031

FILED

JUN 25 2009 OREGON SECRETARY OF STATE

Name of Domestic Business Corporation MT. HOOD MOTORS, INC.

Jurisdiction: OREGON

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

Registered Agent
CHARLES D MOHN
6635 COOPER SPUR RD
MOUNT HOOD PARKDALE OR 97041

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) 6635 COPPER SPUR RD MOUNT HOOD PARKDALE OR 97041
- 4) President (Name & Address)
 CLARENCE BICE
 6625 COOPER SPUR

MOUNT HOOD PARKDALE OR 97041

6) Signature

8) Date

6/1/09

3) Mailing Address (Address,city,state,zip) %TEVRIS WYERS PO BOX 417

5) Secretary (Name & Address)
CHARLES MOHN
6635 COOPER SPUR RD
MOUNT HOOD PARKDALE OR 97041

7) Printed Name

CHARLES MOHN

9) Daytime Phone Number

HOOD RIVER OR 97031

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: You can also fax to (503) 378-4381. Filing fees may be paid with VISA or MasterCard. Submit the card number and expiration date on a separate page for your protection.

ANRPF1-04/08/09