No. <b>W 30925</b>		Due no later than Jun 30, 2014 Annual Report Form		2. Registered A	Registered Agent and Address (NO PO BOX)     MICHAEL HOLCOMB			
Return to:				MICHAEL H				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.  AMMP CO. LLC  MICHAEL S HOLCOMB  860 HUGHES DR  PAYETTE ID 83661  USA			860 HUGHES DR PAYETTE ID 83661			
				2 N = 2	3. <u>New</u> Registered Agent Signature:*			
				3. <u>New</u> Registe				
4. Limited Liability Con	npanies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
Manager Manager			860 HUGHES DR 860 HUGHES DR	PAYETTE PAYETTE	ID ID	USA USA	83661 83661	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 30925		Signature: Michael Holcomb			Date: 04/15/2014			
		Name (type or p		Title: Manager				
Processed 04/15/2014	l,	* Electronically pro	vided signatures are accepted as origin	nal signatures.				