No. W 15653		Due no later than Jun 30, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. AMD ENTERPRISES L.L.C. ALAN D. DOPP 3575 TAYLORVIEW LN. AMMON ID 83406 USA		2. Registered Agent and Address (NO PO BOX) ALAN DOPP 3575 TAYLORVIEW LN AMMON ID 83406 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Co.	mpanies: Enter Nai	mes and Addres	sses of at least one Member or Manager.	•			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	MELANIE M	DOPP	3575 TAYLORVIEW LN	AMMON	ID	USA	83406
MEMBER	MORGUN D D		3575 TAYLORVIEW LN	AMMON	ID	USA	83406
MEMBER	MEMBER MARIELL B D		3575 TAYLORVIEW LN	AMMON	ID	USA	83406
MEMBER DALTON J [OOPP	3575 TAYLORVIEW LN	AMMON	ID	USA	83406
MEMBER C D		OPP	3575 TAYLORVIEW LN	AMMON	ID	USA	83406
MANAGER	ALAN D DOPP		3575 TAYLORVIEW LN	AMMON	ID	USA	83406
MEMBER	MARGARET	E. DOPP	3575 TAYLORVIEW LN.	AMMON	ID	USA	83406
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Alan Dopp		Date: 04/23/2015			
W 15653		Name (type or print): Alan Dopp Title: Manager					
Processed 04/23/201	5	* Electronically	provided signatures are accepted as original	signatures.			