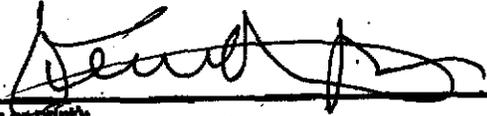


No. C 180236	Reinstatement Annual Report Form ADMIN DISSOLVED 12/09/2011.		2. Registered Agent and Office (NOT A P.O. BOX) KEVIN KNIGHTON 2326 E CINEMA DR MERIDIAN ID 83642.														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ALL VALLEY PET CLINIC NORTH NAMPA, INC. KEVIN KNIGHTON 2326 E CINEMA DR. MERIDIAN ID 83642		3. New Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>DIRECTOR/ PRESIDENT/ SECRETARY</td> <td>KEVIN C KNIGHTON</td> <td>2326 E CINEMA DRIVE</td> <td>MERIDIAN</td> <td>ID</td> <td>USA</td> <td>83642</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	DIRECTOR/ PRESIDENT/ SECRETARY	KEVIN C KNIGHTON	2326 E CINEMA DRIVE	MERIDIAN	ID	USA	83642
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DIRECTOR/ PRESIDENT/ SECRETARY	KEVIN C KNIGHTON	2326 E CINEMA DRIVE	MERIDIAN	ID	USA	83642											
5. Organized Under the Laws of: IDAHO C 180236	6. Signature:  Name (type or print): <u>Kevin C Knighton DVM</u>		Date: <u>8/8/2012</u> Title: <u>President</u>														