

## FILED EFFECTIVE

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|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| No. <b>C 144875</b>                                                                                                     | <b>Reinstatement Annual Report Form<br/>ADMIN DISSOLVED 10/06/2009</b>                                                                                |                                                                                                      | <b>2. Registered Agent and Office (NOT A P.O. BOX)</b>           |
| Return to:<br><b>SECRETARY OF STATE<br/>400 N 4th STREET<br/>PO BOX 83720<br/>BOISE, ID 83720-0080</b>                  | <b>1. Mailing Address: Current in this box if needed.</b><br><br><b>ENERGY SOLUTIONS, INC.</b><br><br><b>310 S PINWOOD DR<br/>POST FALLS ID 83854</b> |                                                                                                      | <b>JOHN P MOYER<br/>310 S PINWOOD DR<br/>POST FALLS ID 83854</b> |
| <b>REINSTATEMENT<br/>FEE DUE: \$30.00</b>                                                                               | <b>3. New Registered Agent Signature.</b>                                                                                                             |                                                                                                      |                                                                  |
| <b>4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.</b> |                                                                                                                                                       |                                                                                                      |                                                                  |
| <b>Office Held</b>                                                                                                      | <b>Name</b>                                                                                                                                           | <b>Street or PO Address</b>                                                                          | <b>City State Country Postal Code</b>                            |
| Secretary                                                                                                               | Kathryn Moyer                                                                                                                                         | 310 S. Pinewood                                                                                      | Post Falls ID K. 83854                                           |
| President                                                                                                               | John Moyer                                                                                                                                            | 310 S. Pinewood pr.                                                                                  | PF ID Kasten 83854                                               |
| <b>5. Organized Under the Laws of:</b>                                                                                  |                                                                                                                                                       |                                                                                                      |                                                                  |
| <b>IDAHO<br/>C 144875</b>                                                                                               |                                                                                                                                                       | <b>6. Signature:</b> <u>Kathryn T. Moyer</u><br><b>Name (type or print):</b> <u>Kathryn T. Moyer</u> | <b>Date:</b> <u>10-2009</u><br><b>Title:</b> <u>Secretary</u>    |
| <b>Issued 10/19/2009 by KAH</b>                                                                                         |                                                                                                                                                       |                                                                                                      |                                                                  |