

FILED EFFECTIVE**REINSTATEMENT**

No. W 45436	Annual Report Form ADMIN DISSOLVED 03/09/2007	2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable AMP ENTERPRISE, LLC 6618 N 6000 W REXBURG, ID 83440	M ALAN PARKINSON 6618 N 6000 W REXBURG, ID 83440 3. <u>New</u> registered agent signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"><thead><tr><th>Office held</th><th>Name</th><th>Street or P.O. Address</th><th>City</th><th>State</th><th>Zip</th></tr></thead><tbody><tr><td>member</td><td>M. Alan Parkinson</td><td>6618 N. 6000 W.</td><td>Rexburg</td><td>Idaho</td><td>83440</td></tr><tr><td>member</td><td>Michele A. Parkinson</td><td>6618 N. 6000 W.</td><td>Rexburg</td><td>Idaho</td><td>83440</td></tr></tbody></table>			Office held	Name	Street or P.O. Address	City	State	Zip	member	M. Alan Parkinson	6618 N. 6000 W.	Rexburg	Idaho	83440	member	Michele A. Parkinson	6618 N. 6000 W.	Rexburg	Idaho	83440
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member	Michele A. Parkinson	6618 N. 6000 W.	Rexburg	Idaho	83440															
5. Organized under the laws of: IDAHO W 45436	6. Signature <u>M. Alan Parkinson</u> Date <u>4-3-2007</u> Name (Typed or Printed) <u>M. Alan Parkinson</u> Title <u>member</u>																			

Issued 03/23/2007 by CLH