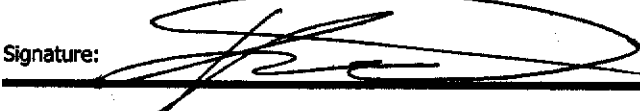
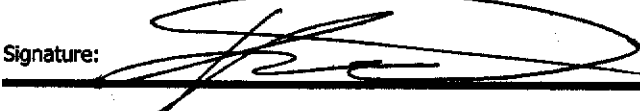
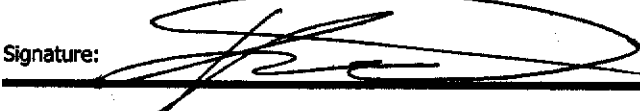


No. C 169543	Reinstatement Annual Report Form ADMIN DISSOLVED 01/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) KEITH OLSTROM 3269 MAZE AVE BOISE ID 83706														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ALLSTATE ALLIANCE MONITORING SERVICES CORPORATION KEITH OLSTROM 3269 MAZE AVE BOISE ID 83706				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>PRESIDENT</td><td>KEITH OLSTROM</td><td>PO BOX 1662</td><td>BOISE</td><td>ID</td><td>ADA</td><td>83701</td></tr></tbody></table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRESIDENT	KEITH OLSTROM	PO BOX 1662	BOISE	ID
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
PRESIDENT	KEITH OLSTROM	PO BOX 1662	BOISE	ID	ADA	83701											
5. Organized Under the Laws of: IDAHO C 169543		6. <table border="1"><tr><td>Signature: </td><td>Date: 06/07/10</td></tr><tr><td>Name (type or print): KEITH OLSTROM</td><td>Title: President</td></tr></table>				Signature: 	Date: 06/07/10	Name (type or print): KEITH OLSTROM	Title: President								
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Issued 06/07/2010 by DK1																	