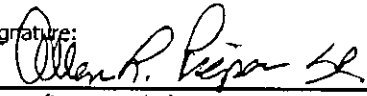


C 68041

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No. C 68041	Reinstatement Annual Report Form ADMIN DISSOLVED 01/04/2008		2. Registered Agent and Office (NOT A P.O. BOX)															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. A.L.P. INCORPORATED PO BOX 427 ROCKAWAY BEACH OR 97136		ALLEN L PIEPER 4230 SW 4TH AVE. NEW PLYMOTH ID 83655															
REINSTATEMENT FEE DUE: \$30.00			3. <u>New</u> Registered Agent Signature.															
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>Allen L Pieper</td><td>102 Hwy 101 S.</td><td>Rockaway</td><td>OR</td><td></td><td>97136</td></tr></tbody></table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Allen L Pieper	102 Hwy 101 S.	Rockaway	OR		97136
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
President	Allen L Pieper	102 Hwy 101 S.	Rockaway	OR		97136												
5. Organized Under the Laws of: IDAHO C 68041	6. Signature:  Name (type or print): Allen L Pieper		Date: 1-7-15 Title: President															

Issued 01/06/2015 by online