2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F98000006641

BRANDI, RALPH

IRVINE, CA 92614

2381 MORSE AVENUE

Name:

Address:

City-St-Zip:

Entity Name: MICROSEMI CORP.-INTEGRATED PRODUCTS

FILED Dec 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11861 WESTERN AVENUE GARDEN GROVE, CA 92841 **Current Mailing Address: New Mailing Address:** 11861 WESTERN AVENUE 2381 MORSE AVE GARDEN GROVE, CA 92841 IRVINE, CA 92614 FEI Number: 33-0568048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYES ST TALLAHASSEE, FL 32301 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: KAREN HARRIS, ASSISTANT VP Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LEIBEL, DENNIS R Name: Name: 2381 MORSE AVE Address: Address: City-St-Zip: IRVINE, CA 92614 City-St-Zip: Title: P/C Title: () Delete () Change () Addition Name: PETERSON, JAMES Name: 2381 MORSE AVENUE Address: Address: IRVINE, CA 92614 City-St-Zip: City-St-Zip: **VPCF** Title: Title: () Delete () Change () Addition SONKSEN, DAVID R Name: Name: 2381 MORSE AVENUE Address: Address: City-St-Zip: IRVINE, CA 92614 City-St-Zip: Title: CVPO () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: HOANG M. NGO CNTR 12/23/2006