REINSTATEMENT

FILED EFFECTIVE

No. W 8694	Annual Report Form ADMIN DISSOLVED 08/06/2001	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 INTEGRATIVE MEDICAL TECHNOLOGIES, L SANDRA PRESCOTT ~~1196 W 600 S~~ 140 S. Broadway ~~PINGREE, ID 83262~~ Blackfoot, ID 83221 01 AUG 27 AM 10:25 OFFICE OF SECRETARY OF STATE STATE OF IDAHO	SANDRA PRESCOTT 1196 W 600 S PINGREE, ID 83262 3. New registered agent signature

4. Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
Limited Liability Companies: Enter Names and Addresses of ☒ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
Manager	Sandra Prescott	140 S. Broadway	Blackfoot	ID	83221

5. Organized under the laws of:
IDAHO
W 8694

6.
Signature X Sandra Prescott Date X 5/20/01
Name (Typed or Printed) Sandra Prescott Title Manager

Issued 08/15/2001