REINSTATEMENT ADMIN DISSO TOPO OF FORM 2. Registered Agent and Office NOT A P.O. BOX C 128247 TROMAS CHELTON Brian Risa 'nο. 401 W COLLINS SIDING Making Adiabetic - Corp. Stert this box of approache Return to: SECRETARY OF STATE BLACKFOOT ANIMAL CLINIC, P.A. BLACKFOOT, ID 83221 700 WEST JEFFERSON THOMAS SHELTON Brian Risa PO BOX 63720 401 W COLLINS RD BOISE, ID 83720-0080 New registered agent signature -FEE DUE \$30.00 BLACKFOOT, ID 83221 Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Street or P.O. Address Office held President Brian Risa 341 N 345W Blackfoot ID 8.322/ Hirector Dave Stanley 354 N 300 W Blackfoot ID 8.322/ Hirector 5. Organized under the laws of: IDAHO C 128247 Brian Name (Typed or Printed) issued 02/27/2002

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1: Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.
- Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information.

 Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mall Box.
- Block 3: Only a new registered agent must sign in Block 2.
- Block 4: Enter names and business addresses of president, secretary, and directors (for corporations only) or managers/members (for LLC's only). Note: Putting "same as last year" or "same as above" will not be accepted.
- Block 5: May not be altered through the use of this form.
- Block 6: The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.