No. W 19633		Due no later than Jun 30, 2013	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form	LISA LINTNER				
		1. Mailing Address: Correct in this box if needed. LOTUS MEDICINE, LLC LISA LINTNER 708 BUTTERCUP ROAD HAILEY ID 83333	708 BUTTERCUP ROAD HAILEY ID 83333 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Limited Liability Cor	mpanies: Enter Nan	nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER LISA LINTNE		R 708 BUTTERCUP ROAD	HAILEY	ID	USA	83333	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 19633		Signature: Lisa Lintner	Date: 05/01/2013				
		Name (type or print): Lisa Lintner	Title: President				
Processed 05/01/2013	rocessed 05/01/2013 * Electronically provided signatures are accepted as original signatures.						