REINSTATEMENT

FILED EFFECTIVE

No. C7	ADN	Annual Report Form ADMIN DISSOLVED 04/07/2004				2. Registered Agent and Office NOT A P.O. BOX VICKI SMITH			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720			VETERINARY MEDICAL FOUNDATION				1 365 N ORCHARD STE 30 1 346 W 44 th St BOISE, ID 8376 6 Kuna ID 83634		
		BOX 6573 346 W 4th St				Kuna			
FEE DUE \$30.00		BOISE, ID 837	1D 8379 7 Kuna ID 83634				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	<u>Name</u>		Street or P.O. Ac	ldress		City	<u>State</u>	<u>Zip</u>	
Pres Bd members	Connie Blayı Bill Kearle Margret t a Ko		346 W	Ave 4th St	Kuna	daho Falls ID 83 6 34 "	ID 83402		
Secv-Treas	Brad Franci Jack Smiley Jack Walker Vicki Smit	s, DVM DVM	" 346 W 4	11	11 11	" " Kuna ID	8363 <u>4</u>		
Organized under the laws of:			- //	1/2 ~		. 11	/ 12	٠ر 🔨	
IDAHO			Signature Signature				_ Date <u>6-/3-</u>		
C 71830			Name (Typed or				Title Fxec Dic, LVMA		
Issued 06	3/08/2005 by KDV	V							