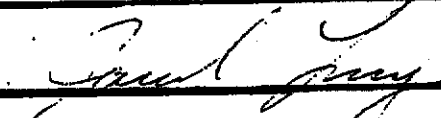


Reinstatement for W 56002

No. W 56002	Reinstatement Annual Report Form ADMIN DISSOLVED 02/05/2009		2. Registered Agent and Office (NOT A P.O. BOX) JARED C LOWRY 4428 DDIE ST IDAHO FALLS ID 83401			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. FREEDOM THERAPY LLC 4428 DDIE ST IDAHO FALLS ID 83401 3951 Willow Ridge Dr. IDAHO FALLS, ID 83401		3. New Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
Member	Jared Lowry	3951 Willow Ridge Dr.	Idaho Falls	ID.	USA	83401
5. Organized Under the Laws of: IDAHO W 56002					6. Signature:  Date: 2-5-10 Name (type or print): Jared Lowry Title: member	
Issued 02/05/2010 by SL1						