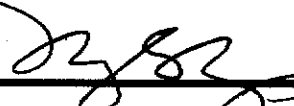


FILED EFFECTIVE

No. C 106852	Reinstatement Annual Report Form ADMIN DISSOLVED 10/06/2005		2. Registered Agent and Office (NOT A P.O. BOX) NANCY R. FINDLAY 1020 MAIN ST STE 470 BOISE ID 83702															
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. FIRST BENEFIT PLANS, INC. NANCY R FINDLAY 1020 MAIN ST #470 BOISE ID 83702		3. New Registered Agent Signature.															
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Pres.</td> <td>Nancy Findlay</td> <td>145 Horizon Dr</td> <td>Boise,</td> <td>ID</td> <td></td> <td>ADA 83702</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres.	Nancy Findlay	145 Horizon Dr	Boise,	ID		ADA 83702
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
Pres.	Nancy Findlay	145 Horizon Dr	Boise,	ID		ADA 83702												
5. Organized Under the Laws of: IDAHO C 106852		6. Signature:  Name (type or print): Nancy R. Findlay Date: 8/22/09 Title: Pres																
Issued 08/17/2009 by NLB																		