

FILED EFFECTIVE

## REINSTATEMENT

No. <b>C 140326</b>	<b>Annual Report Form</b> ADMIN DISSOLVED 11/06/2003		2. Registered Agent and Office <b>NOT A P.O. BOX</b>													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>FEE DUE \$30.00</b>	1. Mailing Address: (Correct in this box, if applicable) BUTTERFLY MEDICINE FOUNDATION, INC. LILY FINCH <del>2334 N 15TH ST</del> <i>2900 N Government way #304</i> COEUR D ALENE, ID <del>83854</del> <i>83815</i>		LILY FINCH 2900 N GOVERNMENT WAY #304  COEUR D ALENE, ID 83815  3. <u>New</u> registered agent signature													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																
<table border="0"> <thead> <tr> <th data-bbox="66 795 560 828"><u>Office held</u></th> <th data-bbox="560 795 738 828"><u>Name</u></th> <th data-bbox="738 795 1110 828"><u>Street or P.O. Address</u></th> <th data-bbox="1110 795 1274 828"><u>City</u></th> <th data-bbox="1274 795 1404 828"><u>State</u></th> <th data-bbox="1404 795 1568 828"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="66 828 560 947">President</td> <td data-bbox="560 828 738 947">Lily Finch</td> <td data-bbox="738 828 1110 947">2900 N Government way #304</td> <td data-bbox="1110 828 1274 947">Coeur d Alene</td> <td data-bbox="1274 828 1404 947">ID</td> <td data-bbox="1404 828 1568 947">83815</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	President	Lily Finch	2900 N Government way #304	Coeur d Alene	ID	83815
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
President	Lily Finch	2900 N Government way #304	Coeur d Alene	ID	83815											
5. Organized under the laws of: IDAHO C 140326		6. Signature <u><i>Lily Finch</i></u> Date <u><i>7/2/05</i></u> Name (Typed or Printed) <u><i>Lily Finch</i></u> Title <u><i>President</i></u>														

Issued 06/23/2005 by MS1

**FILED EFFECTIVE**

# REINSTATEMENT

No. <b>C 118874</b>		<b>Annual Report Form</b> ADMIN DISSOLVED 06/08/2005		2. Registered Agent and Office <b>NOT A P.O. BOX</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>FEE DUE \$30.00</b>		1. Mailing Address (Complete this box if applicable)		G SCOTT RAWLINGS 135 N 300 E	
		S & B ELECTRIC, INC.  135 N 300 E  PRESTON, ID 83263		PRESTON, ID 83263	
3. <u>New</u> registered agent signature					
4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	G. Scott Rawlings	135 N 300 E	Preston	ID	83263
Secretary	Ruth Kae Rawlings	135 N 300 E	Preston	ID	83263
5. Organized under the laws of: IDAHO C 118874			6. Signature <u>G. Scott Rawlings</u> Date <u>06-20-05</u> Name (Typed or Printed) <u>G. Scott Rawlings</u> Title <u>President</u>		