No. <b>C 140326</b>		Due no later than Aug 31, 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  Mailing Address: Correct in this box if needed.  ITERFLY MEDICINE FOUNDATION, INC.  Y FINCH  10 N GOVERNMENT WAY #304	LILY FINCH 2900 N GOVERNMENT WAY #304 COEUR D'ALENE ID 83815  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busine		EUR D ALENE ID 83815  dresses of President, Secretary, and Directors. Treasurer		ered Agent Si	ignature.		
Office Held Nar		Street or PO Address	City	State	Country	Postal Code	
	N SLADE NNAH RAMOS	PO BOX 821 8001 GEORGE FOX PLACE	EAGAR LORTON	AZ VA	USA USA	85925 78657	
5. Organized Under the Laws of	of: 6. Ani	6. Annual Report must be signed.*					
ID	Sig	nature: Lily E Finch	Date: 06/20/2013				
C 140326		me (type or print): Lily E Finch	Title: Director				
Processed 06/20/2013	* Elect	* Electronically provided signatures are accepted as original signatures.					