No. C 200704	Reinstatement Annual Report Form ADMIN DISSOLVED 05/02/2017	2. Registered Agent and Office **(NOT A P.O. BOX)**
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. **Mailing Address: Correct in this box if needed.** STEM CELL CENTERS OF ~~IDAHO~~ PC 223 W IRONWOOD DR ~~COEUR D ALENE~~ ID 83814 Stem Cell Centers of Idaho PC 711 N. Garry Dr. Liberty Lake, WA 99019	EMILY AUTOR 223 W IRONWOOD DR COEUR D ALENE ID 83814
REINSTATEMENT FEE **DUE:** $30.00		3. New Registered Agent Signature: **FILED**

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	Emily Autor	711 N. Garry D.	Liberty Lake,	WA	Spokane	99019

5. Organized Under the Laws of:	6.
IDAHO C 200704	Signature: Emily Autor Date: 6-5-17 Name (type or print): Emily Autor Title: President

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