

No. W 102781		Due no later than Apr 30, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. STONEBRIDGE ASSISTED LIVING, LLC. MATT GAVER 13301 CEDAR PARK DR HERRIMAN UT 84096 USA		JAMI GAVER 132 S 300 W JEROME ID 83338			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name MATT C GAVER	Street or PO Address 13301 CEDAR PARK DR		City HERRIMAN	State UT	Country USA	Postal Code 84096
5. Organized Under the Laws of: ID W 102781		6. Annual Report must be signed.* Signature: Matt Gaver Name (type or print): Matt Gaver Date: 02/11/2014 Title: Member					
Processed 02/11/2014 * Electronically provided signatures are accepted as original signatures.							