

No. W 96296	Due no later than Sep 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CARE2SHARE TRAVEL, L.L.C. RAY KOHLMAN 330 E BANNOCK ST #702 BOISE ID 83712 USA	RAYMOND W KOHLMAN 330 E BANNOCK ST #702 BOISE ID 83712	
		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.			
Office Held	Name	Street or PO Address	City State Country Postal Code
MANAGER	RAYMOND W KOHLMAN	330 E. BANNOCK STREET, NO. 702	BOISE ID USA 83712
5. Organized Under the Laws of: ID W 96296	6. Annual Report must be signed.* Signature: Raymond W. Kohlman Name (type or print): Raymond W. Kohlman		Date: 09/16/2014 Title: Owner/Manager
Processed 09/16/2014		* Electronically provided signatures are accepted as original signatures.	