

No. W 77099 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009 1. Mailing Address: Correct in this box if needed. TRANSITIONS A CARING CONNECTION, LLC 2971 N MUMBARTO AVE BOISE ID 83713-5080		2. Registered Agent and Office (NOT A P.O. BOX) DONNA CLEGG LMSW 2971 N MUMBARTO AVE BOISE ID 83713-5080													
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager Member (circle one)</td> <td>Donna Clegg</td> <td>2971 N Mumbarto Ave</td> <td>Boise</td> <td>Id</td> <td></td> <td>83713</td> </tr> </tbody> </table>		Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager Member (circle one)	Donna Clegg	2971 N Mumbarto Ave	Boise	Id		83713	3. New Registered Agent Signature.
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code										
Manager Member (circle one)	Donna Clegg	2971 N Mumbarto Ave	Boise	Id		83713										
5. Organized Under the Laws of: IDAHO W 77099 Issued 08/17/2011 by CLH	6. Signature: <u>Donna Clegg</u> Date: <u>8/30/11</u> Name (type or print): <u>Donna Clegg</u> Title: <u>LMSW</u>															