

No. W 3531	Due no later than Feb 28, 2010 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.		TINA SPEARS 330 W CHUBBUCK RD #34 CHUBBUCK ID 83202			
	QUALITY HOME CARE STAFFING SERVICE, LLC TINA SPEARS 258 MCKINLEY AVE POCATELLO ID 83201		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
MEMBER	TINA SPEARS	330 W CHUBBUCK #34	CHUBBUCK	ID	USA	83202
MEMBER	KITA MARAVILLA	978 WINGATE	POCATELLO	ID	USA	83201
5. Organized Under the Laws of: ID W 3531		6. Annual Report must be signed.* Signature: Tina Spears Name (type or print): Tina Spears Date: 12/17/2009 Title: Owner				
Processed 12/17/2009		* Electronically provided signatures are accepted as original signatures.				