

No. W 81240		Due no later than Feb 28, 2014		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. AUREUS HEALTHCARE ONE LLC ROBERT L HERBOLSHEIMER 13609 CALIFORNIA ST SUITE 500 OMAHA NE 68154-5260		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA	
				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	DAWN WOLF	13609 CALIFORNIA STREET	OMAHA	NE	USA 68154-5233
5. Organized Under the Laws of: DE W 81240		6. Annual Report must be signed.* Signature: Dawn Wolf Name (type or print): Dawn Wolf Date: 02/19/2014 Title: Manager			
Processed 02/19/2014		* Electronically provided signatures are accepted as original signatures.			