

No. W 105845	Due no later than Aug 31, 2012 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.		SHAWN BOSH 134 N 3966 E RIGBY ID 83442			
	HOSPICE STORE AND SUPPLY L.L.C. (THE) SHAWN BOSH 134 N 3966 E RIGBY ID 83442		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	SHAWN BOSH	134 N 3966 E	RIGBY	ID	USA	83442
5. Organized Under the Laws of: ID W 105845		6. Annual Report must be signed.* Signature: Shawn Bosh Name (type or print): Shawn Bosh Date: 06/27/2012 Title: Owner/manager				
Processed 06/27/2012		* Electronically provided signatures are accepted as original signatures.				