

No. W 136466		Due no later than Apr 30, 2017 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		1. Mailing Address: Correct in this box if needed. JUNE BALDWIN CARE, LLC MONICA E PETERSON 319 SUNRISE RIM RD NAMPA ID 83686-8327 USA		MONICA E PETERSON 319 SUNRISE RIM RD NAMPA ID 83686-8327			
NO FILING FEE IF RECEIVED BY DUE DATE				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 MANAGER	SUZANN MARGARET HAWKES SARAH LOUISE BURTON	1450 E. COVEY RUN COURT 5019 OLD OAK LANE	EAGLE HIGHLAND	ID UT	USA USA	83616 84003	
5. Organized Under the Laws of: ID W 136466		6. Annual Report must be signed.* Signature: Monica E Peterson Name (type or print): Monica E Peterson					
		Date: 02/21/2017 Title: agent					
Processed 02/21/2017 * Electronically provided signatures are accepted as original signatures.							