No. <b>W 137080</b>		Due no later than Apr 30, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  LE BOIS QUALITY CARE LLC JOANN AKINS 5110 SUNDERLAND DR BOISE ID 83704			JOANN AKINS 5110 SUNDERLAND DR BOISE ID 83704  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses of	at least one Member or Manager					
Office Held Nam		ries and riddresses of	Street or PO Address		City	State	Country	Postal Code
MEMBER RAYMOND MATTHEW AKINS			11060 HALSTEAD CRT		BOISE	ID	USA	83713
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Raymond m akins			Date: 02/26/2017			
W 137080		Name (type or print): Raymond m akins			Title: Owner			
Processed 02/26/2017		* Electronically provided signatures are accepted as original signatures.						