

No. W 172450		Due no later than Oct 31, 2017		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. HERITAGE HOME HEALTH OF TWIN FALLS, LLC 1219 CHENEY DR W TWIN FALLS ID 83301		DANNY FRASURE 1009 W QUINN RD POCATELLO ID 83202			
				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	TROY BELL	3022 SHELLY PLACE	POCATELLO	ID	USA	83201	
MEMBER	DANNY FRASURE	1649 ISLAND VIEW COURT	FRUIT HEIGHTS	UT	USA	84037	
5. Organized Under the Laws of: ID W 172450		6. Annual Report must be signed.* Signature: Danny Frasure Name (type or print): Danny Frasure					
		Date: 09/07/2017 Title: President					
Processed 09/07/2017		* Electronically provided signatures are accepted as original signatures.					