No. <b>W 163200</b>		Due no later than Mar 31, 2018			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MARICARMEN MARTINEZ				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  MARICARMEN MARTINEZ HOME DAYCARE LLC MARICARMEN MARTINEZ PO BOX 954 MOUNTAIN HOME ID 83647			656NW CEDAR AVE MOUNTAIN HOME ID 83647  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
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 M	/ARICARMEI	N MARTINEZ	656NW CEDAR AVE		MOUNTAIN HOME	ID	USA	83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Maricarmen Martinez			Date: 01/30/2018			
W 163200		Name (type or print): Maricarmen Martinez			Title: Owner			
Processed 01/30/2018 * Electronically provided signatures are accepted as original signatures.								