| No. W 25362 | | Due no later than Aug 31, 2015 | | 2. Registered A | 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. ALTERNATIVE SERVICE CONCEPTS, L.L.C. SHARON L PROSSER 2501 MCGAVOCK PIKE SUITE 802 NASHVILLE TN 37214 USA | | 921 S ORCH/ BOISE ID 8 | NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 3. New 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 | BER SHARON L PROSS | | 2501 MCGAVOCK PIKE SUITE 802 | NASHVILLE | TN | USA | 37214 | |
| MEMBER CAROLYN V | | ADKINS | 2501 MCGAVOCK PIKE SUITE 802 | NASHVILLE | TN | USA | 37214 | |
| MEMBER | GLENN BACKUS | | 2501 MCGAVOCK PIKE SUITE 802 | NASHVILLE | TN | USA | 37214 | |
| 5. Organized Under the Laws of: | | 6. Annual Report | | | | | | |
| DE W 25362 | | Signature: CAROLYN V. ADKINS | | | Date: 07/23/2015 | | | |
| | | Name (type or | | Title: CFO | | | | |
| Processed 07/23/2015 | - | * Electronically provided signatures are accepted as original signatures. | | | | | | |