No. W 77796		Due no later than Sep 30, 2014		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			RYAN J MCALLISTER			
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.			2770 CARRIAGE WAY TWIN FALLS ID 83301			
		ADVANTAGE REHABILITATION SERVICES, LLC RYAN J MCALLISTER 303 WEST 3RD AVE SALMON ID 83467			3. New Registered Agent Signature:*			
				J. <u>INEW</u> Registe				
4. Limited Liability Comp	anies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MANAGER	TIFFANIE A MCALLISTER RYAN J MCALLISTER		303 W. 3RD AVE. 303 W. 3RD AVE.	SALMON SALMON	ID ID	USA USA	83467 83467	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 77796		Signature: Ryan J. McAllister		Da	Date: 08/20/2014			
		Name (type or print): Ryan J. McAllister		Tit	Title: Registered Agent			
Processed 08/20/2014		* Electronically prov	vided signatures are accepted as origina	al signatures.				