

No. W 141519	Due no later than Aug 31, 2017 Annual Report Form		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. NEW DIRECTION SOLUTIONS LLC ADECCO LEGAL DEPT 10151 DEERWOOD PARK BLVD BLDG 200 STE 400 JACKSONVILLE FL 32256		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705-3225			
			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	SOLIANT HEALTH, INC.	10151 DEERWOOD PARK BLVD. BLDG 200, STE. 400	JACKSONVILLE	FL	USA	32256
5. Organized Under the Laws of: FL W 141519		6. Annual Report must be signed.* Signature: Gerald Robinson Name (type or print): Gerald Robinson Date: 08/01/2017 Title: VP-Tax				
Processed 08/01/2017		* Electronically provided signatures are accepted as original signatures.				