No. W 109487		Due no later than Dec 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. INDEPENDENT HEALTHCARE SOLUTIONS, LLC ALANA ERICKSON PO BOX 384 MCCALL ID 83638		[2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080					ALANA ERICKSON 865 SHELIA LN MCCALL ID 83638 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar								
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER ALANA ERICKSON		CKSON	PO BOX 384		MCCALL	ID	USA	83638
5. Organized Under the Laws of: ID W 109487		6. Annual Report must be signed.* Signature: alana erickson Name (type or print): alana erickson			Date: 11/14/2017 Title: registered agent			
Processed 11/14/2017 * Electronically provided signatures are accepted as original signatures.								