

No. <b>W 95168</b>		<b>Due no later than Jul 31, 2014</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		ERIC E MOTT 1472 E IRON EAGLE DR EAGLE ID 83616			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		HOME HEALTH SERVICES OF IDAHO LLC ERIC E MOTT 1472 E IRON EAGLE DRIVE EAGLE ID 83616 USA					
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	WILLIAM STEWART WILDER	PO BOX 1207	EAGLE	ID	USA	83616	
MANAGER	ERIC E MOTT	PO BOX 1207	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 95168</b>		Signature: Eric E Mott			Date: 07/07/2014		
		Name (type or print): Eric E Mott			Title: Manager		
Processed 07/07/2014		* Electronically provided signatures are accepted as original signatures.					