No. W 46712		Due no later than Jan 31, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		DAVID H KELLERMAN				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MOUNTAIN HOME CAR CARE CENTER LLC DAVID H KELLERMAN 675 W 6TH S MOUNTAIN HOME ID 83647			6050 N 18TH E MTN HOME ID 83647 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	DAVID H KE	ELLERMAN	6050 N 18 E		MTN HOME	ID		83647
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: David H. Kellerman			Date: 11/22/2016			
W 46712		Name (type or print): David H. Kellerman			Title: Owner/ President			
Processed 11/22/2016 * Electronically provided signatures are accepted as original signatures.								