

No. W 81644		Due no later than Feb 28, 2018		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. HOME OPTIONS, LLC SHAYNE CARPENTER 255 BLUE LAKES BLVD N 663 TWIN FALLS ID 83301		SHAYNE V CARPENTER 1407 MAPLE AVE TWIN FALLS ID 83301			
				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	SHAYNE CARPENTER	1407 MAPLE AVE	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID W 81644		6. Annual Report must be signed.* Signature: Shayne Carpenter Name (type or print): Shayne Carpenter Date: 01/24/2018 Title: Owner					
Processed 01/24/2018		* Electronically provided signatures are accepted as original signatures.					