

No. W 169932		Due no later than Aug 31, 2018 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		1. Mailing Address: Correct in this box if needed. S&G HOME HEALTH LLC 6255 E PARTRIDGE CT AMMON ID 83406		BRAD STAUFFER 6255 E PARTRIDGE CT AMMON ID 83406			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name BRADLEY STAUFFER	Street or PO Address 6255		City AMMON	State ID	Country USA	Postal Code 83406
5. Organized Under the Laws of: ID W 169932		6. Annual Report must be signed.* Signature: BRADLEY J STAUFFER Name (type or print): BRADLEY J STAUFFER Date: 06/20/2018 Title: Managing Member					
Processed 06/20/2018 * Electronically provided signatures are accepted as original signatures.							