




No. <b>W 127696</b>	<b>Due no later than Jul 31, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> ALI HOLA 7393 S ACACIA AVE BOISE ID 83709																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> IDAHO TENDER CARE TRANSIT LLC ALI HOLA 7393 S ACACIA AVE BOISE ID 83709		3. <u>New</u> Registered Agent Signature.																																			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%; text-align: left;">Manager or Member</th> <th style="width: 15%; text-align: left;">Name</th> <th style="width: 25%; text-align: left;">Street or PO Address</th> <th style="width: 10%; text-align: left;">City</th> <th style="width: 10%; text-align: left;">State</th> <th style="width: 10%; text-align: left;">Country</th> <th style="width: 15%; text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>ALI HOLA</td> <td>7393 S. Acacia Ave</td> <td>Boise,</td> <td>ID</td> <td></td> <td>83709</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	ALI HOLA	7393 S. Acacia Ave	Boise,	ID		83709	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	ALI HOLA	7393 S. Acacia Ave	Boise,	ID		83709																																
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of:  <div style="text-align: center;">IDAHO W 127696</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;">           Signature:  </td> <td style="width: 40%; padding: 5px;">           Date: <u>5/27/15</u> </td> </tr> <tr> <td style="padding: 5px;">           Name (type or print):  <u>Ali HOLA</u> </td> <td style="padding: 5px;">           Title: _____         </td> </tr> </table>			Signature: 	Date: <u>5/27/15</u>	Name (type or print): <u>Ali HOLA</u>	Title: _____																															
Signature: 	Date: <u>5/27/15</u>																																					
Name (type or print): <u>Ali HOLA</u>	Title: _____																																					

Issued 05/28/2015 by JL1

110997

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM