No. <b>W 66227</b>		Due no later than Aug 31, 2018		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  AHC HOME HEALTH OF ARIZONA, LLC CINDY M STICE 215 N WHITLEY DR STE 3		215 N WHITL	CINDY M STICE 215 N WHITLEY DR STE 3 FRUITLAND ID 83619			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		FRUITLAND ID 83619  mes and Addresses of at least one Member or Manager.		3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
	Name	nes and Addresse.	Street or PO Address	City	State	Country	Postal Code	
MANAGER	MANAGER DAVID W NATTRESS		215 N WHITLEY DRIVE STE 3	FRUITLAND	ID	,	83619	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 66227		Signature: sara jackson bonfiglio			Date: 06/19/2018			
		Name (type or		Title: admin assistant				
Processed 06/19/2018 * Electronically provided signatures are accepted as original signatures.								