

No. W 50611		Due no later than May 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. M G HOME CARE LLC MARIO A GONGORA 738 W CEDAR POINTE WAY NAMPA ID 83686		MARIO A GONGORA 738 W CEDAR POINTE WAY NAMPA ID 83686-8368		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	
MANAGER	MARIO ADOLFO GONGORA	738 W CEDAR POINTE WAY	NAMPA	ID		83686	
5. Organized Under the Laws of: ID W 50611		6. Annual Report must be signed.* Signature: MARIO GONGORA Name (type or print): MARIO GONGORA		Date: 03/20/2018 Title: OWNER			
Processed 03/20/2018		* Electronically provided signatures are accepted as original signatures.					