No. W 147206				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. ABODE H4H, LLC 503 S. WOODRUFF AVE IDAHO FALLS ID 83401		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*				
RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nan		mes and Addresses of at	least one Member or Manage	er.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	ABODE HEAL	THCARE, INC.	1910 FAIRVIEW AVE EAST	SUITE 101	SEATTLE	WA	USA	98102
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE W 147206		Signature: DAVID KOSLOFF		Date: 01/25/2018				
		Name (type or print): DAVID KOSLOFF			Title: AUTHORIZED SIGNER			
Processed 01/25/2018	* Electronically provided signatures are accepted as original signatures.							