No. W 5035 Return to:	Due no later than November 30, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable CASCADE APARTMENTS LLC ALLEN LEE CENTERS PO BOX 518 MERIDIAN, ID 83680	ALLEN LEE CENTERS 3770 S LINDER MERIDIAN, ID 83642  3. New Registered Agent Signature
Limited Liability Companie Office held Name  Possiclent Lee Cenu	es: Enter Names and Addresses of Managers.  Street or P.O. Address  CH  TERS  ON STATEMENT OF ST	ty State Zip Perokaj ID SSC80
	a valdēt atstructus lietu ved 1900.	2000 No March 1720 (12 (12 (12 (12 (12 (12 (12 (12 (12 (12
5. Organized Under the Laws of: IDAHO W 5035 Issued 09/02/2008	6. Signature Name (Typed or LEE ENTERS	Date 10/6/18