

No. <b>W 112638</b>		<b>Due no later than Apr 30, 2018</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  TRINITY FULL LIFE CARE LLC ELISHIA SMITH 3383 N FIVE MILE RD #236 BOISE ID 83713		ELISHIA SMITH 5390 S FIVE MILE RD BOISE ID 83709			
				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	
MEMBER	TRINITY ASSISTED LIVING OF IDA	3383 N FIVE MILE RD #236	BOISE	ID	USA	83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 112638</b>		Signature: Elishia Smith			Date: 04/27/2018		
		Name (type or print): Elishia Smith			Title: Registered Agent		
Processed 04/27/2018		* Electronically provided signatures are accepted as original signatures.					