

No. W 157388		Due no later than Oct 31, 2016		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. ASSUMPTION HEALTH LLC ARACELI GRATZINGER 12585 W EXPLORER DR STE 100 BOISE ID 83713		ARACELI GRATZINGER 967 W HEMPSTEAD DR EAGLE ID 83616-8361			
				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	A GRATZINGER	967 W. HEMPSTEAD DRIVE	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 157388		Signature: Araceli Gratzinger				Date: 10/21/2016	
		Name (type or print): Araceli Gratzinger				Title: Owner	
Processed 10/21/2016		* Electronically provided signatures are accepted as original signatures.					