

No. W 49909		Due no later than Apr 30, 2011		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. ALLIANCE HOME HEALTH OF IDAHO, LLC JUSTIN L LARSEN 545 WEST 465 N STE 100 PROVIDENCE UT 84332		TERESA DIXON 19456 S YOXALL RD DOWNEY ID 83234			
				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	JUSTIN L LARSEN	3256 N 1450 E	NORTH LOGAN	UT	USA	84341	
5. Organized Under the Laws of: ID W 49909		6. Annual Report must be signed.* Signature: Justin Larsen Name (type or print): Justin Larsen					
		Date: 05/10/2011 Title: Owner/Member					
Processed 05/10/2011		* Electronically provided signatures are accepted as original signatures.					