

No. W 183230		Due no later than May 31, 2018		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. CHRISTOPHER FAMILY CARE LLC ALAN CHRISTOPHER 653 MILL STREAM ST REXBURG ID 83440		ALAN CHRISTOPHER 653 MILL STREAM ST REXBURG ID 83440			
				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	ALAN CHRISTOPHER	653 MILL STREAM ST	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: ID W 183230		6. Annual Report must be signed.* Signature: Alan Christopher Name (type or print): Alan Christopher				Date: 05/07/2018 Title: Member	
Processed 05/07/2018		* Electronically provided signatures are accepted as original signatures.					