No. <b>W 51687</b>		Due no later than Jun 30, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  DON'S HOME CARE, LLC  DONALD H CHALFANT  920 N. GARDEN ST.  BOISE ID 83706		DONALD CHALFANT 920 N. GARDEN ST. BOISE ID 83706  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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 DONALD CHALFANT		ALFANT	920 N GARDEN ST.	BOISE	ID		83706
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Donald Chalfant		Date: 06/30/2018			
W 51687		Name (type or print)	Title: Owner				
Processed 06/30/2018 * Electronically provided signatures are accepted as original signatures.							