No. W 67244		Annual Report Form 1. Mailing Address: Correct in this box if needed. ASPEN SPRINGS ASSISTED LIVING LLC REBECCA L SKALA PO BOX 1508		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				REBECCA L SKALA 3134 SPIRIT LAKE CUTOFF RD SPIRIT LAKE ID 83869				
				3. <u>New</u> Registered Agent Signature:*				
Office Held	Name	nes and Addresses of at	Street or PO Address		City	State	Country	Postal Code
MEMBER	JOSEPH W SKALA		3132 SPIRIT LAKE CUTOFF RD PO BOX 1508		SPIRIT LAKE	ID	USA	83869
5. Organized Under the Laws of: ID W 67244		6. Annual Report must be signed.* Signature: REBECCA L. SKALA Name (type or print): REBECCA L. SKALA					11/21/2016 OWNER	
Processed 11/21/2016 * Electronically provided signatures are accepted as original signatures.								