



## **Idaho Limited Liability Company Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 08/31/2020

Oort Form
Return completed form within 30 days to I idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

Annual Report: No filing fee if received by the due date.			450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300		/19/
_		Filing Status: Active-Existing Date Formed: 08/21/2018	Formation I	ocale. ID	2.6.7
Name and Mail	ing Address: EASANT CAREGIVING, LLC ERFALLS DR	(1)	Add or Change Mailir		9:24 AM
Registered Age RENEE N DER 1809 E SUMME MERIDIAN, ID	RFALLS DR 83646	ffice (RO) Address: (2)	Change RA and/or R		Received by
(4) Limited Liabilit These will not be	accepted. Changes here will n	If a new agent is appointed in item (2 and addresses of Managers OR Mem not affect the entity mailing address.	bers. Do NOT put	same as last year' or 'same a eded, please add an attachn	s abov
Manager/Member	Name	Business Address	C 11 5	City, State, Zip	4/ 4
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(E) Signature:	Enee 1). Del.	Rock (6)	Date: 8-17-	2020	aweren c
(7) Type/Print Name	Renee N. Dr.F	Rock (6)	Title: CEO	MgR.	# 0