

No. <b>W 124685</b>		<b>Due no later than Apr 30, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  ALL CARE HEALTH SOLUTIONS - PCS DIVISION LLC MIKE FLOWERS 539 S FITNESS PLAZA 100 EAGLE ID 83616		MIKE FLOWERS 4205 W EMERALD BOISE ID 83706			
				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	MIKE FLOWERS	4205 W EMERALD	BOISE	ID	USA	83706	
5. Organized Under the Laws of:  <b>ID W 124685</b>		6. Annual Report must be signed.* Signature: Mike Flowers Name (type or print): Mike Flowers Date: 04/08/2016 Title: Owner					
Processed 04/08/2016		* Electronically provided signatures are accepted as original signatures.					