

No. W 79529		Due no later than Dec 31, 2013		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. MAGIC VALLEY RESIDENTIAL CARE, LLC LYNETTE MCKEAN 04 NORTH 150 WEST JEROME ID 83338		LYNETTE MCKEAN 04 NORTH 150 WEST JEROME ID 83338			
				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	LYNETTE A MCKEAN	04 NORTH MCKEAN	JEROME	ID	USA	83338	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 79529		Signature: Lynnette McKean				Date: 10/16/2013	
		Name (type or print): Lynnette McKean				Title: Owner	
Processed 10/16/2013		* Electronically provided signatures are accepted as original signatures.					