

No. <b>W 136466</b>		<b>Due no later than Apr 30, 2015</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>Annual Report Form</b>		MONICA E PETERSON 319 SUNRISE RIM RD NAMPA 83686-8327			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		JUNE BALDWIN CARE, LLC MONICA E PETERSON 319 SUNRISE RIM RD NAMPA ID 83686-8327 USA					
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	SUZANN MARGARET HAWKES	1450 E. COVEY RUN COURT	EAGLE	ID	USA	83616	
MANAGER	SARAH LOUISE BURTON	5019 OLD OAK LANE	HIGHLAND	UT	USA	84003	
5. Organized Under the Laws of:  <b>ID W 136466</b>		6. Annual Report must be signed.* Signature: MONICA PETERSON Name (type or print): MONICA PETERSON Date: 03/17/2015 Title: MANAGER					
Processed 03/17/2015		* Electronically provided signatures are accepted as original signatures.					