| No. <b>W 160093</b> Return to:   |                | Due no later than Dec 31, 2016 Annual Report Form  1. Mailing Address: Correct in this box if needed.  STOWE GROUP HEALTHCARE, LLC BUSINESS LAW 100 MANPOWER PLACE ATTN BUSINESS LAW MILWAUKEE WI 53212 USA |                                       | Registered Agent and Address (NO PO BOX)     C T CORPORATION SYSTEM |  |       |         |             |
|--|----------------|---|---------------------------------------|---|--|-------|---------|-------------|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE |                |   |                                       | 1   | 921 S ORCHARD ST STE G BOISE ID 83705  3. New Registered Agent Signature:* |       |         |             |
| 4. Limited Liability Compar  | nies: Enter Na | ames and Address  | es of at least one Member or Manager. |   |  |       |         |             |
| Office Held  | Name           |   | Street or PO Address                  |   | City   | State | Country | Postal Code |
| MEMBER   | EXPERIS US     | S INC,  | 100 MANPOWER PLACE                    |   | MILWAUKEE  | WI    | USA     | 53212       |
| 5. Organized Under the Laws of:  DE W 160093   |                | 6. Annual Report must be signed.* Signature: Suzanne Burow Name (type or print): Suzanne Burow  |                                       |   | Date: 12/29/2016<br>Title: Business Law Paralegal                          |       |         |             |
| Processed 12/29/2016 * Electronically provided signatures are accepted as original signatures.                 |                |   |                                       |   |  |       |         |             |