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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 164672</b>                                                                                                                                    |               | <b>Due no later than Apr 30, 2018</b>                                                                                                                                       |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>                                   |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>IDAHO SENIOR LIVING LLC<br>HANS THYGESON<br>2500 WILLAMETTE FALLS DRIVE<br>SUITE 207<br>WEST LINN OR 97068 |           | NORTHWEST REGISTERED AGENT LLC<br>784 S CLEARWATER LOOP STE B<br>POST FALLS ID 83854 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                                             |           | 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                                                                                                                                                 | HANS THYGESON | 2500 WILLAMETTE FALLS DRIVE SUITE 207                                                                                                                                       | WEST LINN | OR                                                                                   | USA     | 97068       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 164672</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: Hans Thygeson<br>Name (type or print): Hans Thygeson                                                                        |           |                                                                                      |         |             |  |
| Date: 02/27/2018<br>Title: Manager                                                                                                                     |               |                                                                                                                                                                             |           |                                                                                      |         |             |  |
| Processed 02/27/2018                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                   |           |                                                                                      |         |             |  |