

No. <b>W 105845</b>		<b>Due no later than Aug 31, 2015</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  HOSPICE STORE AND SUPPLY L.L.C. (THE) SHAWN BOSH 134 N 3966 E RIGBY ID 83442		SHAWN BOSH 134 N 3966 E RIGBY ID 83442			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name SHAWN BOSH	Street or PO Address 134 N 3966 E		City RIGBY	State ID	Country USA	Postal Code 83442
5. Organized Under the Laws of:  <b>ID</b> <b>W 105845</b>		6. Annual Report must be signed.*  Signature: Shawn Bosh Name (type or print): Shawn Bosh  Date: 07/15/2015 Title: Owner					
Processed 07/15/2015      * Electronically provided signatures are accepted as original signatures.							