No. W 160328 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Due no later than Dec 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. TRITON HOME HEALTH CARE LLC CHRISTA COVINGTON 6901 W EMERALD ST B202 B0ISE ID 83704			2. Registered Agent and Address (NO PO BOX) CHRISTA COVINGTON 123 E CHAPPAROSA CT KUNA ID 83634 3. New Registered Agent Signature:*			
				KUNA ID				
NO FILING FEE IF RECEIVED BY DUE DATE				J. Hey Regist	o			
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses o	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	CHRISTA AN	IN COVINGTON	123 E CHAPPAROSA CT	KUNA	ID	USA	83634	
5. Organized Under the Laws of:		6. Annual Report m						
ID		Signature: christa covington			Date: 11/02/2017			
W 160328		Name (type or pr		Title: owner				
Processed 11/02/2017 * Electronically provided signatures are accepted as original signatures.								