

No. W 120830	Due no later than Jan 31, 2015 Annual Report Form	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CHER'S IN HOME CARE, LLC 31 KANSAS AVE HOMEDALE ID 83628-3417	SHARON K ATKINS 31 KANSAS AVE HOMEDALE 83628-3417				
		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
MANAGER	SHARON K ATKINS	31 KANSAS AVE	HOMEDALE	ID	USA	83628-3417
5. Organized Under the Laws of: ID W 120830		6. Annual Report must be signed.* Signature: Sharon K Atkins Name (type or print): Sharon K Atkins Date: 02/14/2015 Title: manager				
Processed 02/14/2015		* Electronically provided signatures are accepted as original signatures.				