

No. <b>W 87803</b>		Due no later than Oct 31, 2013		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>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  ALIGN HOSPICE, LLC JULIA K DAVIS 2512 N. STOKESBERRY LANE 101 MERIDIAN ID 83646 USA		JULIA K DAVIS 2521 WEST SELWAY RAPIDS #102 MERIDIAN ID 83646			
				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	SHERRON C CARLSON	2003 WEST CROSS CREEK DR	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:  <b>ID W 87803</b>		6. Annual Report must be signed.* Signature: Julia K. Davis Name (type or print): Julia K. Davis Date: 08/12/2013 Title: Owner/Administrator					
Processed 08/12/2013		* Electronically provided signatures are accepted as original signatures.					