No. W 32522		Due no later than Aug 31, 2017		2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		GREGOR	GREGORY A BYRON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PARAMOUNT PARKS HEALTH CARE AT EAGLE L.L.C. PO BOX 7156 BOISE ID 83707-1156			3101 W MAIN STE 200 BOISE ID 83702			
				BOISE I				
				3. <u>New</u> Reg	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
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 DOUGLAS JA		AAO	10564 W. BUSINESS PARK LANE	BOISE	ID		83709	
5.0		l	1					
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 32522		Signature: Gregory A. Byron			Date: 07/25/2017			
		Name (type or print): Gregory A. Byron			Title: Registered Agent			
Processed 07/25/2017		* Electronically provided signatures are accepted as original signatures.						