

No. W 177981		Due no later than Feb 28, 2018		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. HEALTH SERVICES, LLC 1059 E IRON EAGLE DR EAGLE ID 83616		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713		
				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	MIKE OLSEN	1059 E. IRON EAGLE DRIVE	EAGLE	ID	USA	83616
MANAGER	STEVE OLSEN	1059 E. IRON EAGLE DRIVE	EAGLE	ID	USA	83616
MANAGER	CAROLYN OLSEN	1059 E. IRON EAGLE DRIVE	EAGLE	ID	USA	83616
MANAGER	DEBORAH OLSEN	1059 E. IRON EAGLE DRIVE	EAGLE	ID	USA	83616
MANAGER	GREGG OLSEN	1059 E. IRON EAGLE DRIVE	EAGLE	ID	USA	83616
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
WA W 177981		Signature: GREGG OLSEN			Date: 02/15/2018	
		Name (type or print): GREGG OLSEN			Title: MANAGER	
Processed 02/15/2018		* Electronically provided signatures are accepted as original signatures.				