

No. W 101358		Due no later than Mar 31, 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		1. Mailing Address: Correct in this box if needed. SEASONS CARE MANAGEMENT, PLLC JULIE K ROBINSON PO BOX 45402 BOISE ID 83711		JULIE K ROBINSON 8003 W. SILKWOOD CT. BOISE ID 83704			
				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	JULIE K ROBINSON	8003 W. SILKWOOD CT.	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID W 101358		6. Annual Report must be signed.* Signature: JULIE K. ROBINSON Name (type or print): JULIE K. ROBINSON			Date: 04/17/2018 Title: MEMBER		
Processed 04/17/2018		* Electronically provided signatures are accepted as original signatures.					