No. <b>W 58662</b>	Due no later than Jan 31, 2018	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		CRYSTAL RUBINK			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		430 NICOLE DRIVE JEROME ID 83338  3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	AN ANGEL'S TOUCH HEALTHCARE, LLC RUBINK CRYSTAL 430 NICOLE DRIVE	JEROME 10				
	JEROME ID 83338	3. <u>New</u> Registe				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter N	lames and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER CRYSTAL	RUBINK 430 NICOLE DRIVE	JEROME	ID		83338	
MANAGER JORI RUB	NK 430 NICOLE DR	JEROME	ID	USA	83338	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: CRUBINK RN		Date: 11/25/2017			
W 58662	Name (type or print): CRUBINK RN		Title: RN/OWNER			
Processed 11/25/2017	* Electronically provided signatures are accepted as original signatures.					