No. W 77796	Due no later than Sep 30, 2013		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			RYAN J MCALLISTER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. ADVANTAGE REHABILITATION SERVICES, LLC RYAN J MCALLISTER 2770 CARRIAGE WAY			2770 CARRIAGE WAY TWIN FALLS ID 83301			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			I WIN FALLS				
	TWIN FALLS ID 83301		3. <u>New</u> Register	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	ames and Addresse	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER RYAN J MCALLISTER 2770 CARRIAGE WAY		2770 CARRIAGE WAY	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Ryan McAllister		Date:	Date: 08/06/2013			
W 77796	Name (type or print): Ryan McAllister		Title:	Title: Registered Agent			
Processed 08/06/2013	* Electronically provided signatures are accepted as original signatures.						