

No. W 112892	Due no later than Apr 30, 2014 Annual Report Form	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. AUBURN CREST HOSPICE COLUMBIA RIVER, LLC SYNERGY HEALTHCARE HOLDINGS, LLC PO BOX 1176 MERIDIAN ID 83680	RICHARD MALM 4334 N BRIGHT ANGEL AVE MERIDIAN ID 83646				
		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	RICHARD MALM	4334 N BRIGHT ANGEL AVE	MERIDIAN	ID	USA	83646
5. Organized Under the Laws of: ID W 112892	6. Annual Report must be signed.* Signature: Jason Fletcher Name (type or print): Jason Fletcher Date: 04/29/2014 Title: Authorized Person					
Processed 04/29/2014		* Electronically provided signatures are accepted as original signatures.				