No. C 94831		Due no later than Mar 31, 2016		2.	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. HELP INSURANCE, INC. H DEAN SUMMERS PO BOX 579 BOISE ID 83701			H DEAN SUMMERS 6307 W INTERCHANGE LANE BOISE ID 83709 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE			Total Company and Discretize Total					
Office Held	Name	ess addresses of Preside	ent, Secretary, and Directors. Tre Street or PO Address		uonar). City	State	Country	Postal Code
PRESIDENT	H DEAN SU	MMERS	PO BOX 579		BOISE	ID	USA	83701
5. Organized Under the Laws of: ID C 94831		6. Annual Report must be signed.* Signature: Monica Garner Name (type or print): Monica Garner			Date: 02/23/2016 Title: Account Manager			
Processed 02/23/2016		* Electronically provided signatures are accepted as original signatures.						