No. <b>C 126150</b>		Due no later than Oct 31, 2017 Annual Report Form		2. Registered	2. Registered Agent and Address (NO PO BOX)  LAURENCE G PARSONS  10425 W CAROLINA DR  BOISE ID 83709  3. New Registered Agent Signature:*			
Return to:				10 000 00000000000000000000000000000000				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  RIGHT! SOLUTIONS, INCORPORATED  MARIA A PARSONS  10425 W CAROLINA DR  BOISE ID 83709		N				
NO FILIN RECEIVED BY		DOISE ID	35709	or <u>item</u> region		griatarer		
4. Corporations: Ente	r Names and Busir	ness Addresses o	of President, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	MARIA A P	ARSONS	10425 W CAROLINA DRIVE	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: N	Maria A. Parsons		Date: 08/20/2017			
C 126150		Name (type	or print): Maria A. Parsons		Title: Director			
Processed 08/20/201	7	* Electronically	provided signatures are accepted as original s	signatures.				