No. W 68779		Due no later than Nov 30, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. HELPFUL SOLUTIONS, LLC ANNA MARIA TRAINER 3695 N SCOTCH PINE LN UNIT 2 COEUR D'ALENE ID 83815-1829 USA			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				3695 N SCOTCI UNIT 2 COEUR D'ALENE	ANNA MARIA TRAINER 3695 N SCOTCH PINE LN UNIT 2 COEUR D'ALENE ID 83815-1829 3. New Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
	Name ANNA MARIA	A TRAINER	Street or PO Address 3695 N SCOTCH PINE LN UNIT 2	City COEUR D'ALENE	State ID	Country USA	Postal Code 83815-1829	
E Organized Under the Law	us of:	6 Appual Bonort	must be signed *					
5. Organized Under the Laws of: ID W 68779		6. Annual Report Signature: Ann		Date: 10/11/2016				
		Name (type or		Title: Manager				
Processed 10/11/2016		* Electronically provided signatures are accepted as original signatures.						