

No. C 180030		Due no later than Sep 30, 2009		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. HEALTH SOLUTIONS INC. Joshua N Andrews 2600 E SELTICE WAY #170 POST FALLS ID 83854		JOSHUA ANDREWS 2600 E SELTICE WAY #170 POST FALLS ID 83854			
				3. <u>New</u> Registered Agent Signature: *			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
TREASURER	Joshua N Andrews	P.O. Box 3370	Post Falls	ID	USA	83877	
5. Organized Under the Laws of: ID C 180030		6. Annual Report must be signed.* Signature: Joshua Name (type or print): Joshua Date: 07/29/2009 Title: Treasurer					
Processed 07/29/2009		* Electronically provided signatures are accepted as original signatures.					