No. W 128477		Due no later than Aug 31, 2017		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. HAND MAID GOODNESS L.L.C. CASSANDRA C SMITH 915 S. KAREY LN. IDAHO FALLS ID 83402			CASSANDRA C SMITH 915 S. KAREY LN. IDAHO FALLS ID 83402-8340 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mos and Addrosss	os of at loast one Member or Manager					
Office Held	Name	nes and Addresse	Street or PO Address		City	State	Country	Postal Code
MANAGER	CASSAND C	SMITH	915 S. KAREY LN.		IDAHO FALLS	ID	USA	83402
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Cassandra C. Smith Date: 08/27/2017						
W 128477		Name (type or print): Cassandra C. Smith Title: Manager						
Processed 08/27/2017 * Electronically provided signatures are accepted as original signatures.								