No. W 168014	Due no later than Jun 30, 2017	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	JUSTIN L JO	JUSTIN L JOHNSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. HANDY SOLUTIONS, LLC JUSTIN L JOHNSON PO BOX 2775 TWIN FALLS ID 83303-2775	KIMBERLY II	3763 N 3720 E KIMBERLY ID 83341-8334 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter	Names and Addresses of at least one Member or Manager.					
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER JUSTIN L JOHNSON 3763		KIMBERLY	ID	USA	83341-8334	
5. Organized Under the Laws of:	Annual Report must be signed.*					
ID	Signature: Deborah K Moore		Date: 05/23/2017			
W 168014	Name (type or print): Deborah K Moore	Title: CPA				
Processed 05/23/2017	* Electronically provided signatures are accepted as original signatures.					