No. <b>W 106436</b>	Due no later than Sep 30, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		No. Deliverage and Deliverage Conference and	CATHERINE COYLE 1272 HOODOO LOOP ROAD OLDTOWN ID 83822			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  RIGHT HAND MAN, LLC (THE)  CATHERINE R COYLE  1272 HOODOO LOOP ROAD						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			OLDTOWN II				
	OLDTOWN ID 83822		3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Na	mes and Address	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER CATHERINE	R COYLE	1272 HOO DOO LOOP	OLDTOWN	ID	USA	83822	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID	Signature: C	ATHERINE COYLE		Date: 10/14/2015			
W 106436	Name (type or print): CATHERINE COYLE Title: MANAGER						
Processed 10/14/2015	* Electronically provided signatures are accepted as original signatures.						