

No. <b>W 58169</b>		<b>Due no later than Jan 31, 2010</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		CAMMIE CHAVEZ 4281 W LENNOX LOOP COEUR D'ALENE ID 83815			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		HELPING HANDS TO RECOVERY LLC MARC E CHAVEZ 4281 W LENNOX LOOP COEUR D'ALENE ID 83815 USA					
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	CAMMIE CHAVEZ	4281 W LENNOX LOOP	COEUR D'ALENE	ID	USA	83815	
MEMBER	MARC CHAVEZ	4281 W LENNOX LOOP	COEUR D'ALENE	ID	USA	83815	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 58169</b>		Signature: Cammie Chavez				Date: 01/28/2010	
		Name (type or print): Cammie Chavez				Title: Member	
Processed 01/28/2010		* Electronically provided signatures are accepted as original signatures.					