No. W 56832		Due no later than Dec 31, 2015		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. GUSTAVEL, LLC JACK W GUSTAVEL 5713 E SHORELINE DR POST FALLS ID 83854-6855			JACK W GUSTAVEL 5713 E SHORELINE DR POST FALLS ID 83854-6855 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mos and Addrosso	s of at least one Member or Manager					
Office Held	Name	illes and Addresse	Street or PO Address		ity	State	Country	Postal Code
MANAGER	JACK W GU	STAVEL	5713 E SHORELINE DR		OST FALLS	ID	Country	83854-6855
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 56832		Signature: JACK W. GUSTAVEL Date: 10/14/2015						
		Name (type or print): JACK W. GUSTAVEL Title: MANAGER						
Processed 10/14/2015 * Electronically provided signatures are accepted as original signatures.								