No. W 143519	Due no later than Oct 31, 2016	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	JACOB GOSS			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	5438 ELLIOTT STREET IONA ID 83427-8342			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	AKIVA CONSULTING SERVICES, LLC JACOB D GOSS 5438 ELLIOTT STREET	IONA ID	101VA 10 03727-0372		
	IONA ID 83427	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA				
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MANAGER JACOB D GOSS 5438 ELLIOTT STREET		IONA	ID	USA	83427
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Jacob Goss Date: 11/18/2016				
W 143519	Name (type or print): Jacob Goss	Title: Manager			
Processed 11/18/2016	* Electronically provided signatures are accepted as original signatures.				