No. <b>W 151616</b>		Due no later than May 31, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ADDRESS OF THE PARTY OF THE PAR	SUSAN CONGER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. GROUP CRUISE GETAWAYS, LLC SUSAN CONGER 4230 N BALLANTYNE LN EAGLE ID 83616		EAGLE ID	4230 N BALLANTYNE LN EAGLE ID 83616-8361  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	anies: 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	
MEMBER SUSAN CONG		IGER	4230 N BALLANTYNE LN	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Susan Conger			Date: 06/25/2018			
W 151616		Name (type o	or print): Susan Conger		Title: owner			
Processed 06/25/2018 * Electronically provided signatures are accepted as original signatures.								