No. W 97631		Due no later than Nov 30, 2012 Annual Report Form 1. Mailing Address: Correct in this box if needed. GOTTA-HAV-IT, LLC DOUGLAS R. RALLISON 326 MAPLE CREEK ROAD FRANKLIN ID 83237		2. Registered A	2. Registered Agent and Address (NO PO BOX) DOUGLAS RALLISON 326 MAPLE CREEK ROAD FRANKLIN ID 83237 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				326 MAPLE (FRANKLIN II				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		USA	os of at least one Member or Manager					
Office Held	Name	mes and Address	Street or PO Address	City	State	Country	Postal Code	
MEMBER MANAGER	SHERRIE L. DOUGLAS R		326 MAPLE CREEK ROAD 326 MAPLE CREEK ROAD	FRANKLIN FRANKLIN	ID ID	USA USA	83237 83237	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 97631		Signature: Sherrie L. Rallison Name (type or print): Sherrie L. Rallison			Date: 09/14/2012 Title: Member			
Processed 09/14/2012		* Electronically p	rovided signatures are accepted as origina	al signatures.				