No. <b>W 79365</b> Return to:		Due no later than Nov 30, 2016  Annual Report Form		Registered Agent and Address (NO PO BOX)  JOE CAPELLI			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GGB GROUP JOE CAPELI	1. Mailing Address: Correct in this box if needed.  GGB GROUP, LLC  JOE CAPELLI PO BOX 215  LACLEDE ID 83841  USA		421 MANLEY CREEK RD LACLEDE ID 83841			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
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 MICHA MEMBER JOE CA	LE CAPELLI PELLI	P.O. BOX 215 P.O. BOX 215	LACLEDE LACLEDE	ID ID	USA USA	83841 83841	
5. Organized Under the Laws of:	6. Annual Rep	6. Annual Report must be signed.*					
ID	Signature:	Signature: Joe Capelli		Date: 11/28/2016			
W 79365	Name (type	Name (type or print): Joe Capelli Title: Owner			er		
Processed 11/28/2016	* Electronically	* Electronically provided signatures are accepted as original signatures.					