No. <b>W 130474</b>		no later than Oct 31, 2014	2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.  ALL GUSSIED UP, LLC  BRENDA TOLINE  PO BOX 712  BONNERS FERRY ID 83805		BRENDA TOLINE 6564 MADISON ST BONNERS FERRY 83805  3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ALL GUSSIED UF BRENDA TOLINI PO BOX 712						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ente	er Names and Addresses	of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER KENNET	H D TOLINE	6564. MADISON ST	BONNERS FERRY	ID	USA	83805	
5. Organized Under the Laws of:	6. Annual Report r	6. Annual Report must be signed.*					
ID	Signature: Kenr	Signature: Kenneth Toline		Date: 10/31/2014			
W 130474	Name (type or p	Name (type or print): Kenneth Toline		Title: Manager			
Processed 10/31/2014	* Electronically pro	* Electronically provided signatures are accepted as original signatures.					