No. <b>W 113944</b>	Due no later than May 31, 2016		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		KIMBERLY (	KIMBERLY GURGEL			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		N. 1000 N. 1000 N. 1000	1697 N ESTANCIA PL EAGLE ID 83616-9998			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ELITE SPECIALTY STAFFING, LLC KIM GURGEL ELITE SPECIALTY STAFFING PO BOX 1731		EAGLE ID				
	EAGLE ID 83616-9998		3. <u>New</u> Registe	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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	
MEMBER ROBERT STEVEN GURGEL 1697 N ESTANCIA PL		EAGLE	ID	USA	83616		
5. Organized Under the Laws of:	of: 6. Annual Report must be signed.*						
ID	Signature: Robert Gurgel			Date: 03/19/2016			
W 113944	Name (type or print): Robert Gurgel			Title: Member LLC			
Processed 03/19/2016	* Electronically provided signatures are accepted as original signatures.						