

No. W 60620		Due no later than Mar 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CROWNHOLDERS, LLC MARTHA RIPPLE 1515 WARMS SPRINGS AVE BOISE ID 83712		MARTHA RIPPLE 1515 WARMS SPRINGS AVE BOISE ID 83712		
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 MANAGER	Name MARTHA RIPPLE	Street or PO Address 1515 WARMS SPRINGS AVE	City BOISE	State ID	Country	Postal Code 83712
5. Organized Under the Laws of: ID W 60620		6. Annual Report must be signed.* Signature: Martha Ripple Name (type or print): Martha Ripple Date: 01/19/2016 Title: Manager				
Processed 01/19/2016 * Electronically provided signatures are accepted as original signatures.						