No. W 72437	D	Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CARLOS SUAREZ JR			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. CRAFTSMAN CENTER, LLC CARLOS SUAREZ 205 VERMEER DR. SUITE D PONDERAY ID 83852-6004 USA		205 VERMEER DR. SUITE D			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CARLOS SU			PONDERAY ID 83852-6004			
	SUITE D			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	SUAREZ JR	PO BOX 804	SANDPOINT	ID		83864	
MANAGER JACQUEI	INE SUAREZ	PO BOX 804	SANDPOINT	ID		83864	
5. Organized Under the Laws of: 6. Annual Re		ort must be signed.*					
ID	Signature: 0	Signature: Carlos M. Suarez Jr. Date: 01/23/2018					
W 72437	Name (type	Name (type or print): Carlos M. Suarez Jr.			Title: Manager		
Processed 01/23/2018	* Electronically	* Electronically provided signatures are accepted as original signatures.					