No. **W 85383**	**Due no later than Jul 31, 2012** **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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** CRUMB GROUP LLC (THE) JOHN COLEMAN PO BOX 1293 TWIN FALLS ID 83301	PENELOPE PARKER 2034 ADDISON AVE E TWIN FALLS ID 83301 3. New 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	JOE SHELTON	PO BOX 1293	TWIN FALLS	ID	USA	83303-1293

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 85383**	Signature: John Coleman	Date: 05/31/2012
	Name (type or print): John Coleman	Title: Agent

Processed 05/31/2012

* Electronically provided signatures are accepted as original signatures.