No. W 3891		Due no later than Apr 30, 2014	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. C.R. STUFF, L.L.C. ROBERT GLENN PO BOX 993 GLENNS FERRY ID 83623	ROBERT GLENN 995 E GARFIELD GLENNS FERRY ID 83623 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compan	nies: Enter Nar	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	ROBERT GLE CONNIE J G		GLENNS FERRY GLENNS FERRY	ID ID	USA USA	83623 83623	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Robert J. Glenn Date: 02/12/2014					
W 3891		Name (type or print): Robert J. Glenn	Title: Managing Member				
Processed 02/12/2014	02/12/2014 * Electronically provided signatures are accepted as original signatures.						