No. W 77821	Reinstatement Annual Report Form ADMIN DISSOLVED 12/07/2010	2. Registered Agent and Office (NOT A P.O. BOX) NANCY I ANDREWS 71 REVEILLE LN SANDPOINT ID 83864
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: $30.00	1. Mailing Address: Correct in this box if needed. CROSSTEK, L.L.C. ~~NANCY I ANDREWS~~ Kimberly K Carlson ~~71 REVEILLE LN~~ 139 Heath Lake Rd ~~SANDPOINT ID 83864~~ Sagle, ID 83860 USA	3. New Registered Agent Signature. Kimberly K. Carlson OK change of R/A sent

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.

Manager/Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager	Nancy I Andrews	71 Reveille Ln	Sandpoint	ID	USA	83864
Manager	Kimberly K. Carlson	139 Heath Lake Rd	Sagle	ID	USA	83860

5. Organized Under the Laws of:	6.
IDAHO W 77821	Signature: Nancy I Andrews Date: 1/12/11 Name (type or print): Nancy I Andrews Title: Manager

Issued 01/10/2011 by KAH