No. W 53874		Due no later than Aug 31, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		MICHAEL SOUTO				
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. CRYSTAL BROOKE ESTATES, LLC MICHAEL SOUTO 161 5TH AVE S STE 310		161 5TH AVE S STE 310 TWIN FALLS ID 83301				
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MICHAEL S							
	TWIN FALLS	TWIN FALLS ID 83301		3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter	Names and Addres	sses of at least one Member or Manager.						
Office Held Name		Street or PO Address		City	State	Country	Postal Code	
MEMBER MICHAEL	SOUTO	PO BOX 142		BLUEPOINT	NY	USA	11716	
5. Organized Under the Laws of: 6. Annual Report must be signed.*								
ID	Signature:	Signature: Steven D. Peterson			Date: 06/18/2018			
W 53874	Name (type	Name (type or print): Steven D. Peterson			Title: Attorney			
Processed 06/18/2018	* Electronically	* Electronically provided signatures are accepted as original signatures.						