No. **W 116343**	**Due no later than Aug 31, 2017** **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.** CROWE MANAGEMENT SERVICES, LLC STEVEN D CROWE PO BOX 1132 SUN VALLEY ID 83353	STEVEN D CROWE 220 ELKHORN RD SUN VALLEY ID 83353 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
MANAGER	STEVEN D CROWE	220 ELKHORN ROAD PO BOX 1132	SUN VALLEY	ID	USA	83353

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
DE **W 116343**	Signature: Steven D. Crowe	Date: 08/25/2017
	Name (type or print): Steven D. Crowe	Title: Manager

Processed 08/25/2017

* Electronically provided signatures are accepted as original signatures.