


No. W 31922	Reinstatement Annual Report Form ADMIN DISSOLVED 10/06/2009		2. Registered Agent and Office (NOT A P.O. BOX)	
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.		SUMMER M MOORE	
	CROWN MARKETING LLC 12639 W EXPLORER DR #185 BOISE ID 83713 80 Cottonwood Ct Building C Suite 150 Eagle ID 83616		80 COTTONWOOD COURT BLVD C SUITE 150 EAGLE ID 83616 3. New Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.				
Office Held	Name	Street or PO Address	City	State Country Postal Code
Manager	Pablo Del Castillo	80 Cottonwood Ct	Eagle	ID 83616
5. Organized Under the Laws of: IDAHO W 31922		6. Signature:  Date: 1/26/10 Name (type or print): Pablo Del Castillo Title: Manager		
Issued 01/26/2010 by LJM				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a **new** registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.