

|  |                 |  |        |   |         |                  |  |
|--|-----------------|--|--------|---|---------|------------------|--|
| No. <b>W 90415</b>   |                 | <b>Due no later than Feb 29, 2016</b>  |        | 2. Registered Agent and Address <b>(NO PO BOX)</b>            |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br>KING'S KROWN (PROPERTY MANAGEMENT) LLC.<br>BEVERLY K HEDIN<br>PO BOX 4578<br>HAILEY ID 83333-4578 |        | BEVERLY K HEDIN<br>1230 WOODSIDE BLVD<br>HAILEY ID 83333-4578 |         |                  |  |
|  |                 |  |        | 3. <u>New</u> 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      |  |
| MEMBER   | BEVERLY K HEDIN | P.O.BOX 4578   | HAILEY | ID  | USA     | 83333-4578       |  |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.*  |        |   |         |                  |  |
| <b>ID<br/>W 90415</b>  |                 | Signature: Beverly K Hedin   |        |   |         | Date: 03/31/2016 |  |
|  |                 | Name (type or print): Beverly K Hedin  |        |   |         | Title: owner     |  |
| Processed 03/31/2016   |                 | * Electronically provided signatures are accepted as original signatures.  |        |   |         |                  |  |