

No. W 120486	Due no later than Dec 31, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ELISABETH MOORE 14089 N CHURCH RD RATHDRUM ID 83858		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. CRUZE 2089 LLC PO BOX 2013 POST FALLS ID 83877		3. <u>New</u> Registered Agent Signature.		
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager or Member	Name	Street or PO Address	City State Country Postal Code		
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Elizabeth Moore	P.O. Box 2013	Post Falls, ID	Kootenai	83877
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of:		6.			
IDAHO W 120486	Signature: <u>Elizabeth Moore</u>				Date: <u>10-20-14</u>
	Name (type or print): <u>ELISABETH MOORE</u>				Title: <u>Owner</u>

Issued 10/15/2014 by CLH

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM