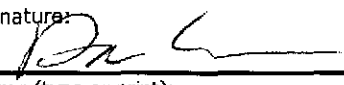


No. W 152345	Reinstatement Annual Report Form ADMIN DISSOLVED 10/04/2016		2. Registered Agent and Office (NOT A P.O. BOX) DAN CROW 567 VICTORIA DR BOISE ID 83705																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. KING CROW GAMES, LLC DAN CROW 567 VICTORIA DR BOISE ID 83705																																					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			3. <u>New</u> Registered Agent Signature.																																			
<table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Dan Crow</td> <td>567 Victoria Dr</td> <td>Boise, ID</td> <td>USA</td> <td></td> <td>83705</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Raina King</td> <td>703 S. Orchard St. Apt. 201</td> <td>Boise, ID</td> <td>USA</td> <td></td> <td>83705</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Dan Crow	567 Victoria Dr	Boise, ID	USA		83705	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Raina King	703 S. Orchard St. Apt. 201	Boise, ID	USA		83705	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Dan Crow	567 Victoria Dr	Boise, ID	USA		83705																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Raina King	703 S. Orchard St. Apt. 201	Boise, ID	USA		83705																																
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 152345		Signature: <u></u> Date: <u>10/21/2016</u> Name (type or print): <u>Dan Crow</u> Title: <u>Owner</u>																																				

Issued 10/20/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM