No. <b>W 144452</b>		Due no later than Nov 30, 2017		2. Register	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JAMES H SCISM II			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CROOKED RIVER VENTURES, LLC  JAMES H. SCISM, II  PO BOX 44  COUNCIL ID 83612		FRUITV	2679 FRUITVALE GLENDALE RD FRUITVALE ID 83612  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	nies: Enter Nai	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	JAMES H. SCISM, II		P.O. BOX 44	COUNCIL	ID	USA	83612	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: James H. Scism			Date: 11/08/2017			
W 144452		Name (type o		Title: Manager				
Processed 11/08/2017		* Electronically provided signatures are accepted as original signatures.						