

No. W 46603	Due no later than Jan 31, 2013 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TRIPLE 7, LLC BRIAN K CROWNOVER 7416 REHEAD DR N LAS VEGAS NV 89084-2303 USA		KEITH CROWNOVER 2596 E. SUMMER DAWN MERIDIAN ID 83642			
			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
MANAGER	BRIAN KEITH CROWNOVER	800 COLDWATER CREEK CIR	NICEVILLE	FL	USA	32578
5. Organized Under the Laws of: ID W 46603	6. Annual Report must be signed.* Signature: Brian Crownover Name (type or print): Brian Crownover		Date: 11/10/2012 Title: Manager			
Processed 11/10/2012		* Electronically provided signatures are accepted as original signatures.				