

|   |  |       |            |        |     |
|---|--|-------|------------|--------|-----|
| 1.) CORPORATION NAME:<br><b>J. Crew Inc.</b>  | DUE DATE: <b>2/29/2016</b>   |       |            |        |     |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CORPORATION SERVICE COMPANY<br/>Bank of America Center, 16th Floor<br/>1111 East Main Street</b> | SCC ID NO: <b>F1814922</b>   |       |            |        |     |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>RICHMOND CITY</b>   | 5.) STOCK INFORMATION  |       |            |        |     |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>DE</b>   | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 100 |
| CLASS   | AUTHORIZED   |       |            |        |     |
| COMMON  | 100  |       |            |        |     |
| 6.) PRINCIPAL OFFICE ADDRESS:<br><br>ADDRESS: 770 BROADWAY<br>CITY/ST/ZIP: NEW YORK, NY 10003   |  |       |            |        |     |

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

|  |                                     |         |                                     |          |
|--|-------------------------------------|---------|-------------------------------------|----------|
| NAME: NICHOLAS P LAMBERTI<br>TITLE: VP/ASST SEC<br>ADDRESS: 770 BROADWAY<br>CITY/ST/ZIP/CO: NEW YORK, NY 10003 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| NAME: VINCENT ZANNA<br>TITLE: VP/TREAS<br>ADDRESS: 770 BROADWAY<br>CITY/ST/ZIP/CO: NEW YORK, NY 10003          | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |
| NAME: MARIA DI LORENZO<br>TITLE: SVP/GC/SEC<br>ADDRESS: 770 BROADWAY<br>CITY/ST/ZIP/CO: NEW YORK, NY 10003     | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: LYNDA MARKOE<br>TITLE: EVP/HUMAN RESOU<br>ADDRESS: 770 BROADWAY<br>CITY/ST/ZIP/CO: NEW YORK, NY 10003    | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: JOAN DURKIN<br>TITLE: SVP/CAO<br>ADDRESS: 7700 BROADWAY<br>CITY/ST/ZIP/CO: NEW YORK, NY 10003            | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/>            | DIRECTOR |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |                                  |           |
|---|----------------------------------|-----------|
| /s/ MARIA DI LORENZO                                | MARIA DI LORENZO, SVP/GC/SEC     | 2/25/2016 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE      |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.