No. <b>W 63680</b> Return to:		Due no later than Jun 30, 2015 Annual Report Form		2. Registered Ag	Registered Agent and Address (NO PO BOX)     CHAD VAUGHN			
				CHAD VAUGH				
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.  CLOVERLEAF GROUP, LLC CHAD VAUGHN 2829 N CITRUS PL BOISE ID 83713 USA			2829 N CITRUS PL			
				BOISE 837	BOISE 83713  3. New Registered Agent Signature:*			
				51 <u></u> 1.eg.sts.				
4. Limited Liability Cor	mpanies: Enter Nar	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	CHAD VAUG	HN	2829 N CITRUS PL	BOISE	ID		83713	
MANAGER	CHRISTY VAUGHN		2829 N CITRUS PL	BOISE	ID		83713	
MANAGER	RICK MAY		349 E ROCKINGHAM	EAGLE	ID		83616	
MANAGER	JANE MAY		349 E ROCKINGHAM	EAGLE	ID		83616	
MANAGER	ALAN J VAUGHN		8846 SILVERLINE DR	FAIRFAX STATION	VA		22039	
MANAGER	BOB J DAWSON		4568 ELMWOOD CT	RIVERSIDE	CA		92506	
MANAGER	BECKY J DAWSON		4568 ELMWOOD CT	RIVERSIDE	CA		92506	
MANAGER	RANDY J WILLSON		15651 WOOD RD	RIVERSIDE	CA		92504	
MANAGER	DEBBIE J WILLSON		15651 WOOD RD	RIVERSIDE	CA		92504	
5. Organized Under the Laws of: 6. Annual R		6. Annual Report r	must be signed.*					
ID		Signature: CHRISTINA VAUGHN			Date: 04/17/2015			
W 63680		Name (type or print): CHRISTINA VAUGHN Title: MANAGER						
Processed 04/17/2015	5	* Electronically pro	vided signatures are accepted as origina	al signatures.				