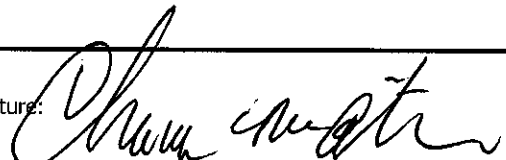


No. <b>W 28596</b>	<b>Due no later than Feb 28, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> CHAUN M MCALISTER 2814 N 17TH COEUR D'ALENE ID 83815
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> MRP, LLC 174 E NEIDER COEUR D'ALENE ID 83815		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.
 

	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/>	Member <input type="checkbox"/>	Chaun McAlister	2814 N. 17th	Coeur d'Alene	ID	USA	83815
Manager <input type="checkbox"/>	Member <input checked="" type="checkbox"/>	Mike McAlister	1639 Havichow Ln	Post Falls	ID	USA	83854
Manager <input type="checkbox"/>	Member <input type="checkbox"/>						
Manager <input type="checkbox"/>	Member <input type="checkbox"/>						

5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold;">IDAHO W 28596</div>	6. Signature:  <hr/> Name (type or print): <u>Chaun McAlister</u> <div style="float: right; text-align: right;">           Date: <u>1-3-13</u>            Title: <u>Owner</u> </div>
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