

No. <b>W 71841</b>		<b>Due no later than Feb 28, 2010</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> ROCKWOOD INSURANCE AGENCY, LLC MICHAEL R. CHAPMAN PO BOX 1600 COEUR D ALENE ID 83816		MICHAEL R. CHAPMAN 2100 NORTHWEST BLVD STE 230 COEUR D'ALENE ID 83814			
				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	DAVE BABB	C/O CHAPMAN LAW OFFICE PO BOX 1600	COEUR D'ALENE	ID	USA	83816	
MANAGER	JAMES SOKOLIS	C/O CHAPMAN LAW OFFICE PO BOX 1600	COEUR D'ALENE	ID	USA	83816	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 71841</b>		Signature: Michael R. Chapman				Date: 01/12/2010	
		Name (type or print): Michael R. Chapman				Title: Authorized Agent	
Processed 01/12/2010		* Electronically provided signatures are accepted as original signatures.					