No. <b>W 7540</b> Return to:		Due no later than Dec 31, 2014  Annual Report Form	2. Registered Agent and Address (NO PO BOX)  AARON CLARK 550 W PACIFIC BLACKFOOT 83221  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  RPA MANAGEMENT L.L.C.  AARON CLARK 550 W PACIFIC BLACKFOOT ID 83221				
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Compa	anies: Enter Nan	nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	AARON CLAR	K 195 GOODWIN DR	BLACKFOOT	ID		83221
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: AARON CLARK	Date: 10,			
W 7540		Name (type or print): AARON CLARK	Title: MANAGING PARTNER			
rocessed 10/15/2014 * Electronically provided signatures are accepted as original signatures.						