No. W 67665		Due no later than Oct 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		JILL M LILI	JILL M LILIENKAMP COOPER 1101 PEARL ST WALLACE ID 83873 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. COOPERKAMP, LLC JILL M LILIENKAMP-COOPER 1101 PEARL ST WALLACE ID 83873 USA		WALLACE II				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nar	mes and Addresses o	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER MEMBER	EMBER MARSHA K LILIENKAMP		1101 PEARL ST 1103 PEARL ST 1103 PEARL ST	Wallace Wallace Wallace	ID ID ID	USA USA	83873 83873 83873	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 67665		Signature: Jill Lili		Date: 08/20/2015				
		Name (type or pr		Title: Member				
Processed 08/20/2015	* Electronically provided signatures are accepted as original signatures.							