

No. W 125495		Due no later than May 31, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CHAPMAN FAMILY GROUP LLC (THE) SHERL CHAPMAN 444 HILLTOP RD CASCADE ID 83611 USA		SHERI CHAPMAN 444 HILLTOP RD CASCADE 83611			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name SHERL L. CHAPMAN	Street or PO Address 444 HILLTOP RD		City CASCADE	State ID	Country USA	Postal Code 83611
5. Organized Under the Laws of: ID W 125495		6. Annual Report must be signed.* Signature: sherl chapman Name (type or print): sherl chapman Date: 03/23/2015 Title: manager					
Processed 03/23/2015 * Electronically provided signatures are accepted as original signatures.							