

|                                                                                                                                                        |                  |                                                                                                                                                |             |                                                               |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------|---------|------------------|--|
| No. <b>W 121191</b>                                                                                                                                    |                  | <b>Due no later than Jan 31, 2017</b>                                                                                                          |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>            |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br>MURPHY GROUP LLC<br>DOUGLAS L MURPHY<br>1522 ELK CREEK DR<br>IDAHO FALLS ID 83404 |             | DOUGLAS L MURPHY<br>1522 ELK CREEK DR<br>IDAHO FALLS ID 83404 |         |                  |  |
|                                                                                                                                                        |                  |                                                                                                                                                |             | 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      |  |
| MEMBER                                                                                                                                                 | DOUGLAS L MURPHY | 127 HAVEN LANE                                                                                                                                 | IDAHO FALLS | ID                                                            | USA     | 83404            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                  | 6. Annual Report must be signed.*                                                                                                              |             |                                                               |         |                  |  |
| <b>ID<br/>W 121191</b>                                                                                                                                 |                  | Signature: Douglas L Murphy                                                                                                                    |             |                                                               |         | Date: 11/28/2016 |  |
|                                                                                                                                                        |                  | Name (type or print): Douglas L Murphy                                                                                                         |             |                                                               |         | Title: owner     |  |
| Processed 11/28/2016                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                      |             |                                                               |         |                  |  |