

No. W 84827		Due no later than Jun 30, 2014 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. PROFESSIONAL ACCOUNT MANAGEMENT, LLC DAVID L CHAPMAN PO BOX 7100 COEUR D ALENE ID 83816 USA		MICHAEL R CHAPMAN 402 W CANFIELD AVE STE 2 COEUR D ALENE ID 83815			
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 MEMBER	Name DAVID L CHAPMAN	Street or PO Address PO BOX 7100		City COEUR D ALENE	State ID	Country USA	Postal Code 83816
5. Organized Under the Laws of: ID W 84827		6. Annual Report must be signed.* Signature: David L Chapman Name (type or print): David L Chapman Date: 05/06/2014 Title: Member					
Processed 05/06/2014 * Electronically provided signatures are accepted as original signatures.							