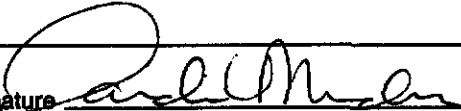


No. W 74697	Due no later than May 31, 2009 Annual Report Form		2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		ROBERT B MUNDEN 517 DAUNTLESS PL CALDWELL, ID 83605 3. <u>New</u> Registered Agent Signature
	CHASIN CHOPPERS LLC ROBERT B MUNDEN 517 DAUNTLESS PL CALDWELL, ID 83605		

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER -	ROBERT MUNDEN	18212 CALICO AVE	NAMPA	ID	83687
ASSISTANT MANAGER -	SANDI MUNDEN	18212 CALICO AVE	NAMPA	ID	83687

5. Organized Under the Laws of: IDAHO W 74697	6.  Signature _____ Date <u>3-13-09</u> Name (Typed or Printed) <u>SANDI MUNDEN</u> Title <u>ASSISTANT MANAGER</u>
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Issued 03/02/2009

Do Not Tape or Staple

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