

|                                                                                                                                                        |                            |                                                                                                                                                      |              |                                                         |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------|---------|-------------|--|
| No. <b>W 50306</b>                                                                                                                                     |                            | <b>Due no later than May 31, 2014</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>MCPHERSON GROUP, LLC (THE)<br>ANDREW A MCPHERSON<br>580 CALDWELL BLVD<br>NAMPA ID 83651 |              | ANDREW MCPHERSON<br>580 CALDWELL BLVD<br>NAMPA ID 83651 |         |             |  |
|                                                                                                                                                        |                            |                                                                                                                                                      |              | 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                                                                                                                                                 | STEPHEN LAWRENCE MCPHERSON | 14 N PARK DR                                                                                                                                         | NAMPA        | ID                                                      | USA     | 83651       |  |
| MEMBER                                                                                                                                                 | SHARON MARIE MCPHERSON     | 14 N PARK DR                                                                                                                                         | NAMPA        | ID                                                      | USA     | 83651       |  |
| MEMBER                                                                                                                                                 | ANDREW ADAM MCPHERSON      | 580 CALDWELL BLVD                                                                                                                                    | NAMPA        | ID                                                      | USA     | 83651       |  |
| MEMBER                                                                                                                                                 | PETER JOHN MCPHERSON       | 3180 MOORELAND AVE NE                                                                                                                                | SALEM        | OR                                                      | USA     | 97035       |  |
| MEMBER                                                                                                                                                 | HEATHER MARIE MCPHERSON    | 3180 MOORELAND AVE NE                                                                                                                                | SALEM        | OR                                                      | USA     | 97035       |  |
| MEMBER                                                                                                                                                 | STEPHEN THOMAS MCPHERSON   | 1925 BURGESS HILL CIR E                                                                                                                              | JACKSONVILLE | FL                                                      | USA     | 32246       |  |
| MEMBER                                                                                                                                                 | AMANDA KAY MCPHERSON       | 1925 BURGESS HILL CIR E                                                                                                                              | JACKSONVILLE | FL                                                      | USA     | 32246       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 50306</b>                                                                                           |                            | 6. Annual Report must be signed.*<br>Signature: Andrew McPherson<br>Name (type or print): Andrew McPherson                                           |              |                                                         |         |             |  |
| Date: 03/24/2014<br>Title: Officer                                                                                                                     |                            |                                                                                                                                                      |              |                                                         |         |             |  |
| Processed 03/24/2014                                                                                                                                   |                            | * Electronically provided signatures are accepted as original signatures.                                                                            |              |                                                         |         |             |  |