FORM LLC

LIMITED LIABILITY COMPANY	Development Name: Rocky Ridge Trace City: Greenwood, S.C.

Name of LLC: Rocky Ridge Trace, LLC LLC includes the following: X For Profit ____Non-Profit

Address: PO Box 566

City Greenville State NC Zip: 27835

Tax ID Number: _____ or date applied for: TBD, after award

Membership	Percentage of Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip: _____	_____%
2. Member Name: Rocky Ridge Trace MM, LLC Address: PO Box 566 City, State, Zip: Greenville, NC 27835	0.01 %
3. Member Name: Taft-Mills Group, LLC (TBD Future Investor) Address: PO Box 566 City, State, Zip: Greenville, NC 27835	99.99 %
4. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
5. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
6. Member Name: _____ Address: _____ City, State, Zip: _____	_____%

NOTE: This form must be completed for each LLC that is involved in the proposed development. If any of the Members are Corporations, Limited Liability Companies, or Limited Partnerships then you must also complete, in addition to this form, one or more of the following, as applicable: FORM CORP, FORM LP, and/or FORM LLC. All necessary forms must be submitted so as to ascertain the Principals of the development.

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Address: PO Box 566

City Greenville State NC Zip: 27835

Tax ID Number: _____ or date applied for: TBD

Membership	Percentage of Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip: _____	_____%
2. Member Name: Taft-Mills Group, LLC Address: PO Box 566 City, State, Zip: Greenville, NC 27835	100 %
3. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
4. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
5. Member Name: _____ Address: _____ City, State, Zip: _____	_____%
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FORM LLC

LIMITED LIABILITY COMPANY	Development Name: Rocky Ridge Trace City: Greenwood, S.C.

Name of LLC: Taft-Mills Group, LLC LLC includes the following: X For Profit ____Non-Profit

Address: PO Box 566

City Greenville State NC Zip: 27835

Tax ID Number: 81-3018669 or date applied for: _____

Membership	Percentage of Ownership
1. Manager (if any): _____ Address: _____ City, State, Zip: _____	_____%
2. Member Name: Thomas F. Taft, Jr Address: PO Box 566 City, State, Zip: Greenville, NC 27835	34.995%
3. Member Name: Jonathan G. Taft, Jr Address: PO Box 566 City, State, Zip: Greenville, NC 27835	34.995%
4. Member Name: Dustin Mills Address: PO Box 566 City, State, Zip: Greenville, NC 27835	20%
5. Member Name: C.J. Tyree Address: PO Box 566 City, State, Zip: Greenville, NC 27835	10%
6. Member Name: Thomas F. Taft, Sr. Address: PO Box 566 City, State, Zip: Greenville, NC 27835	.01%

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