INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date: 0CT 02 2014

FULSHEAR AREA CHAMBER OF COMMERCE 29810 FM 1093 STE H FULSHEAR, TX 77441

Employer Identification Number: 46-3856572 DLN: 17053162335024 Contact Person: RACHEL M LEIFHEIT ID# 31617 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Form 990 Required: Effective Date of Exemption: October 4, 2013 Contribution Deductibility: Addendum Applies:

Dear Applicant:

We are pleased to inform you that upon review of your application for taxexempt status we have determined that you are exempt from Federal income tax under section 501(c)(6) of the Internal Revenue Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-NC" in the search bar to view Publication 4221-NC, Compliance Guide for Tax-Exempt Organizations (Other than 501(c)(3) Public Charities and Private Foundations), which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Director, Exempt Organizations