

|                                                                                                                                                        |             |                                                                                                                                                                               |          |                                                      |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------|---------|-------------|--|
| No. <b>W 92955</b>                                                                                                                                     |             | Due no later than May 31, 2012                                                                                                                                                |          | 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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>ML2 ENTERPRISES LLC<br>JERRY MASON<br>18077 N VICKI RD<br>RATHDRUM ID 83858 |          | JERRY MASON<br>18077 N VICKI RD<br>RATHDRUM ID 83858 |         |             |  |
|                                                                                                                                                        |             |                                                                                                                                                                               |          | 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 |  |
| MANAGER                                                                                                                                                | JERRY MASON | 18077 N VICKI RD                                                                                                                                                              | RATHDRUM | ID                                                   | USA     | 83858       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 92955</b>                                                                                           |             | 6. Annual Report must be signed.*<br>Signature: Jerry Mason<br>Name (type or print): Jerry Mason                                                                              |          |                                                      |         |             |  |
|                                                                                                                                                        |             | Date: 03/20/2012<br>Title: Member/Manager                                                                                                                                     |          |                                                      |         |             |  |
| Processed 03/20/2012                                                                                                                                   |             | * Electronically provided signatures are accepted as original signatures.                                                                                                     |          |                                                      |         |             |  |