

No. W 16349		Due no later than Aug 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MMI PROPERTIES, LLC PO BOX 703 LEWISTON ID 83501		CHRISTOPHER J MOORE 1219 IDAHO ST LEWISTON ID 83501			
NO FILING FEE IF RECEIVED BY DUE DATE				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	CHRISTOPHER J MOORE	1208 VINEYARD DR	LEWISTON	ID	USA	83501	
MEMBER	THEODORE O CREASON	3920 LAKEVIEW DR	LEWISTON	ID	USA	83501	
5. Organized Under the Laws of: ID W 16349		6. Annual Report must be signed.* Signature: Chris Moore Name (type or print): Chris Moore					
		Date: 06/18/2014 Title: Member					
Processed 06/18/2014		* Electronically provided signatures are accepted as original signatures.					