No. <b>W 116931</b>	Due no later than Aug 31, 2017	2. Registered Agent and Address (NO PO BOX)
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address: Correct in this box if nee  JM2 LLC  JOHN COLEMAN  PO BOX 1293  TWIN FALLS ID 83301	JOHN COLEMAN CPA 401 GOODING ST N STE 201 TWIN FALLS ID 83301  3. New Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE		
700 80 8	r Names and Addresses of at least one Member or Manage	
Office Held Name	Street or PO Address	City State Country Postal Code
MEMBER MIKE TA MEMBER MARK V		TWIN FALLS ID USA 83303 TWIN FALLS ID USA 83303
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
l ID	Signature: John Coleman	Date: 07/03/2017
W 116931	Name (type or print): John Coleman	Title: Agent
Processed 07/03/2017	* Electronically provided signatures are accepted as original signatures.	