No. C 151785		Due no later than Nov 30, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. M. C. EXAMS, INC. ANN M MCCLAIN P O BOX 1822 178 CUBAN CREEK RD PRIEST RIVER ID 83856-1822 USA		2. Registered Agent and Address (NO PO BOX) INCORP SERVICES, INC. 1524 S VISTA AVE STE 12 BOISE ID 83705 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Na	ames and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasurer	(optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
TREASURER	STEPHEN E MCCLAIN		P.O. BOX 1822 178 CUBAN CREEK ROAD	PRIEST RIVER	ID	USA	83856-1822
PRESIDENT	ANN M MCCLAIN		P.O. BOX 1822 178 CUBAN CREEK ROAD	PRIEST RIVER	ID	USA	83856-1822
5. Organized Under the Laws of: 6. Ar		6. Annual Report must be signed.*					
ID C 151785		Signature: Ann M. McClain		Date: 10/19/2015			
		Name (type or pri	Title: President				
Processed 10/19/2015		* Electronically provid	led signatures are accepted as original sig	natures.			