

|  |                           |  |  |   |             |                |                      |
|--|---------------------------|--|--|---|-------------|----------------|----------------------|
| No. <b>W 92403</b>   |                           | <b>Due no later than Apr 30, 2012</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )      |             |                |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                           | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>2M SERVICES, L.L.C.<br>MARIANNE HOLMES<br>12139 N AMETHYST DR<br>HAYDEN ID 83835    |  | MARIANNE HOLMES<br>12139 N AMETHYST DR<br>HAYDEN ID 83835 |             |                |                      |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>   |                           |  |  | 3. <u>New</u> Registered Agent Signature:*                |             |                |                      |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.       |                           |  |  |   |             |                |                      |
| Office Held<br>MEMBER  | Name<br>MARIANNE R HOLMES | Street or PO Address<br>12139 AMETHYST DR  |  | City<br>HAYDEN  | State<br>ID | Country<br>USA | Postal Code<br>83835 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 92403</b>                                 |                           | 6. Annual Report must be signed.*<br><br>Signature: Marianne Holmes<br>Name (type or print): Marianne Holmes<br><br>Date: 03/06/2012<br>Title: Owner |  |   |             |                |                      |
| Processed 03/06/2012 * Electronically provided signatures are accepted as original signatures.     |                           |  |  |   |             |                |                      |