

No. <b>W 68232</b>		<b>Due no later than Nov 30, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  MOMMY MARKET CATERING SERVICE, L.L.C. (THE) SHELLEY E CLARK 521 W D ST SHOSHONE ID 83352 USA		SHELLEY CLARK 521 W D ST SHOSHONE ID 83352			
<b>NO FILING FEE IF 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 MEMBER	Name SHELLEY CLARK	Street or PO Address 521 W D ST		City SHOSHONE	State ID	Country USA	Postal Code 83352
5. Organized Under the Laws of:  <b>ID</b> <b>W 68232</b>		6. Annual Report must be signed.*  Signature: Shelley Clark Name (type or print): Shelley Clark  Date: 09/12/2012 Title: Member					
Processed 09/12/2012      * Electronically provided signatures are accepted as original signatures.							