No. <b>W 46600</b> Return to:		Due no later than Jan 31, 2011 Annual Report Form	2. Registered Agent and Address (NO PO BOX)  MARK FULLER 410 MEMORIAL STE 201 IDAHO FALLS ID 83402  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  JMF UNLIMITED, LLC  JACOB FULLER PO BOX 50935  IDAHO FALLS ID 83405-0935				
NO FILING FEE IF RECEIVED BY DUE DATE		Address of the second				
2001	1.	mes and Addresses of at least one Member or Manager.			_	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER JACOB FULLE		ER 560 DOUGLAS	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Jacob Fuller	Date: 01/10/2011			
W 46600		Name (type or print): Jacob Fuller	Title: Manager			
rocessed 01/10/2011 * Electronically provided signatures are accepted as original signatures.						