No. <b>W 24043</b>		Due no later than May 31, 2015		2. Registered Agent and Address (NO PO BOX)				
Return to:	An	Annual Report Form		T LAYNE VANORDEN 1487 PARKWAY DR BLACKFOOT 83221  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MMRE LLC	KURT A JACOBSON						
NO FILING FEE IF RECEIVED BY DUE DATE	NOTTINGHAM ME							
4. Limited Liability Companies: Ent	er Names and Addresses of	at least one Member or Manager.						
Office Held Name		Street or PO Address	(	City	State	Country	Postal Code	
	o okabe Jacobson	5241 E JOPPA RD 5241 E JOPPA RD	-	PERRY HALL PERRY HALL	MD MD	USA	21128 21128	
5. Organized Under the Laws of:	6. Annual Report mu	5. Annual Report must be signed.*						
ID ID	Signature: Kurt Ja	Signature: Kurt Jacobson			Date: 03/26/2015			
W 24043	Name (type or pri	Name (type or print): Kurt Jacobson			Title: member			
Processed 03/26/2015	* Electronically provide	* Electronically provided signatures are accepted as original signatures.						