No. W 11194		Due no later than Feb 28, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		GLENNA TOOMAN 9116 W HALSTEAD DR BOISE ID 83704-6842			
SECRETARY OF STATE	1. Mailin	1. Mailing Address: Correct in this box if needed. MEMORY MAKERS EVENT PLANNING, L.L.C. GLENNA M TOOMAN 9116 W HALSTEAD DR BOISE ID 83704-6842					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GLENNA N						
	BOISE ID			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: Ent	er Names and Addr	esses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER GLENN	A TOOMAN	9116 W HALSTEAD DR	BOISE	ID	USA	83704-6842	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature	Signature: Glenna Tooman Date: 12/16/2009					
W 11194	Name (typ	Name (type or print): Glenna Tooman			Title: Owner/Manager		
Processed 12/16/2009	* Electronical	* Electronically provided signatures are accepted as original signatures.					