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|--|-----------------|--|---------|--|---------|-------------|--|
| No. W 132731 | | Due no later than Jan 31, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form | | DARLA ZOLLINGER 1800 W 5500 S REXBURG 83440-8344 | | | |
| | | 1. Mailing Address: Correct in this box if needed. M M D ENTERPRISES, LLC ALLIED FINANCIAL SERVICES PO BOX 674 REXBURG ID 83440 | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | TOM ZOLLINGER | 1800 W 5500 S | REXBURG | ID | USA | 83440 | |
| MEMBER | DARLA ZOLLINGER | 1800 W 5500 S | REXBURG | ID | USA | 83440 | |
| 5. Organized Under the Laws of: ID W 132731 | | 6. Annual Report must be signed.* Signature: KIRBY J FORBUSH Name (type or print): KIRBY J FORBUSH Date: 01/31/2015 Title: CPA | | | | | |
| Processed 01/31/2015 | | * Electronically provided signatures are accepted as original signatures. | | | | | |