No. <b>W 25995</b>		Due no later than Sep 30, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to:	Α	Annual Report Form		MARCELLA MEDOR 142 E 16TH ST IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MARCOM, LLC	MARC S MURPHY					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ente	r Names and Addresses	of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	S S MURPHY LA MEDOR	PO BOX 50077 142 E 16TH ST	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83405-0077 83404	
5. Organized Under the Laws of: 6. Annual Rep		nust be signed.*					
ID Signature: N		arcus Murphy Date: 11/09/2011					
W 25995	Name (type or p	Name (type or print): Marcus Murphy		Title: Member			
Processed 11/09/2011	* Electronically prov	* Electronically provided signatures are accepted as original signatures.					