No. <b>W 38736</b>		Due no later than Apr 30, 2015			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  MMCM ENTERPRISES, L.L.C.  MICHAELINA MURPHY 847 E FAIRVIEW AVE MERIDIAN ID 83642			MICHAELINA MURPHY 847 E FAIRVIEW AVE. MERIDIAN 83642  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compani	es: Enter Nar	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
	MICHAELINA CHARLES M		PO BOX 339 PO BOX 339		CALDWELL CALDWELL	ID ID		83606 83606
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 38736		Signature: Michaelina Murphy			Date: 02/18/2015			
		Name (type or print): Michaelina Murphy			Title: Member			
Processed 02/18/2015 * Electronically provided signatures are accepted as original signatures.								