INSTRUCTIONS ON REVERSE SIDE

No: 830

Idaho Limited Liability Company Annual Report Form

Due No Later Than November 30, 1995

REINSTATEMENT

Return To:
Secretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-0080

* FIRST NOTICE *
NO FEE REQUIRED

1. Mailing Address — *Please Correct If Not Correct*

P & M, L.L.C.
MAX S ALBERTSON
350 SPOON DR
POCATELLO ID 83204

2. Registered Agent and Office NOT A P.O. BOX

MAX S ALBERTSON
350 SPOON DR
POCATELLO ID 83204

3. Organized Under The Laws of

ID
NO: 830

4. Names and Addresses of ☐ Managers or ☐ Members (check one)

MUST BE PRINTED OR TYPED

Name	Street or P.O. Address	City	State	Zip
Max S. Albertson	350 Spoon Dr.	Pocatello	Ida	83204
Pamela A. Maguire	1465 Sunset Dr.	Pocatello	Ida	83204

5. Signature of the Current Registered Agent (if changed in block 2)

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Max S Albertson Date 12/12/95

Name (Typed or Printed) Max S. Albertson