

No. W 44767	Due no later than Nov 30, 2009 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. M&B, LLC BLAINE E CRUMP 1593 N 5600 W MALAD ID 83252		BLAINE E CRUMP 1593 N 5600 W MALAD ID 83252			
			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
MANAGER	BLAINE E CRUMP	1593 N 5600 W	MALAD	ID	USA	83252
MANAGER	MARIANNE S CRUMP	1593 N 5600 W	MALAD	ID	USA	83252
5. Organized Under the Laws of: ID W 44767	6. Annual Report must be signed.* Signature: Blaine E. Crump Name (type or print): Blaine E. Crump		Date: 09/14/2009 Title: Manager			
Processed 09/14/2009		* Electronically provided signatures are accepted as original signatures.				