

No. W 25874	Due no later than September 30, 2008 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address <input type="checkbox"/> Correct in this box, if applicable MXSMF, LLC PO BOX 774 FILER, ID 83328	GEORGE P AMBROSE 4050 NORTH 2100 EAST FILER, ID 83328 3. <u>New</u> Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER	GEORGE AMBROSE	P.O. BOX 774	FILER	IDAHO	83328
MEMBER	MARTHA AMBROSE	P.O. BOX 774	FILER	IDAHO	83328

5. Organized Under the Laws of: IDAHO W 25874	6. Signature:  Date 7/14/2008 Name (Typed or Printed) <u>GEORGE AMBROSE</u> Title <u>MANAGER</u>
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