

No. W 24043		Due no later than May 31, 2014 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		1. Mailing Address: Correct in this box if needed. MMRE LLC KURT A JACOBSON PO BOX 44814 NOTTINGHAM MD 21236		T LAYNE VANORDEN 1487 PARKWAY DR BLACKFOOT ID 83221			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name KURT JACOBSON	Street or PO Address 5241 E JOPPA RD		City PERRY HALL	State MD	Country USA	Postal Code 21128
5. Organized Under the Laws of: ID W 24043		6. Annual Report must be signed.* Signature: Kurt Jacobson Name (type or print): Kurt Jacobson Date: 05/21/2014 Title: Member					
Processed 05/21/2014 * Electronically provided signatures are accepted as original signatures.							