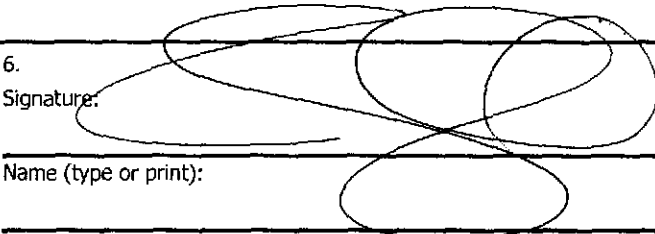


No. W 161249	Due no later than Jan 31, 2018 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JULIA MCMILLEN 1321 W FORT ST BOISE ID 83702
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. JMM INFINITE SOLUTIONS LLC JULIA MCMILLEN 1321 W FORT ST BOISE ID 83702		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/> Julia McMillen 1321 W. Fort St Boise, Id 83702			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> IDAHO W 161249 </div>		6. Signature:  <hr/> Name (type or print): <hr/> <div style="float: right; width: 150px;"> Date: <u>3-6-18</u> Title: _____ </div>	
Issued 03/06/2018 by TLB		128247	