

No. W 83494	Due no later than Apr 30, 2011 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) M LYNN DUNLAP 415 ADDISON AVE STE 1 TWIN FALLS ID 83303																					
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. MBJ, LLC MICHAEL JOHNSON 8082 HAMPSHIRE RD ORANGE CA 92867	3. <u>New</u> Registered Agent Signature.																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.																							
<table border="1"> <thead> <tr> <th>Manager/Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Michael Johnson</td> <td>MANAGER</td> <td>MBJ LLC</td> <td>8082 Hampshire Rd</td> <td>ORANGE, CA</td> <td></td> <td>92867</td> </tr> <tr> <td>BARBARA JOHNSON</td> <td>MEMBER</td> <td>MBJ LLC</td> <td>8082 Hampshire Rd</td> <td>ORANGE, CA</td> <td></td> <td>92867</td> </tr> </tbody> </table>	Manager/Member	Name	Street or PO Address	City	State	Country	Postal Code	Michael Johnson	MANAGER	MBJ LLC	8082 Hampshire Rd	ORANGE, CA		92867	BARBARA JOHNSON	MEMBER	MBJ LLC	8082 Hampshire Rd	ORANGE, CA		92867		
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5. Organized Under the Laws of: CALIFORNIA W 83494	6. Signature: <u>Michael Johnson MBI LLC</u> Date: <u>2/14/11</u> Name (type or print): <u>MICHAEL JOHNSON</u> Title: <u>MANAGER</u>																						
Issued 02/07/2011 by DK1		105586																					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.