No. <b>W 39499</b>		Due no later than May 31, 2015			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		PAMELA J JABS				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  WMJ COMMERCIAL PROPERTIES, L.L.C.  PAMELA J JABS  5573 W BEACHFRONT LANE  BOISE ID 83703			5573 W BEACHFRONT LANE BOISE ID 83703  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	anies: Enter Na	mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	WILLIAM M	JABS	27525 SE STARR RD		EAGLE CREEK	OR		97022
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 39499		Signature: Pamela J Jabs			Date: 05/05/2015			
		Name (type or print): Pamela J Jabs			Title: Agent			
Processed 05/05/2015 * Electronically provided signatures are accepted as original signatures.								