No. <b>W 21311</b>	Due no later than Nov 30, 2009	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	Annual Report Form  1. Mailing Address: Correct in this box if needed.		BRIAN MARTENS 621 NORTH COLLEGE RD STE 100			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	M & M INVESTORS, L.L.C. BRIAN MARTENS 621 NORTH COLLEGE RD STE 100 TWIN FALLS ID 83301  TWIN FALLS ID 83301  TWIN FALLS ID 83301  TWIN FALLS ID 83301					
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER BRIAN MAR		TWIN FALLS	ID	USA	83301	
MANAGER GERALD MA	RTENS 621 NORTH COLLEGE RD STE 100	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID	Signature: Brian Martens	Date: 12/17/2009				
W 21311	Name (type or print): Brian Martens	Title: Manager				
rocessed 12/17/2009 * Electronically provided signatures are accepted as original signatures.						