No. W 174903 Return to:		Due no later than Nov 30, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. TALYN, LLC TAMARA ENGLERT PO BOX 5843 BOISE ID 83705			2. Registered Agent and Address (NO PO BOX) TAMARA ENGLERT 1609 S ABBS ST BOISE ID 83705 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	TAMARA L	ENGLERT	P.O. BOX 5843	BOISE	ID	USA	83705	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 174903		Signature: Tam		Date: 02/13/2018				
		Name (type or		Title: Manager				
Processed 02/13/2018 * Electronically provided signatures are accepted as original signatures.								