No. W 103454 Return to:		Due no later than May 31, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. THPM, LLC ROBERT SANCHEZ PO BOX 6626 BOISE ID 83707			2. Registered Agent and Address (NO PO BOX) ROBERT SANCHEZ 10270 W BROWNSTONE BOISE ID 83709 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		USA						
4. Limited Liability Compa	nies: Enter N	lames and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	ROBERT S	ANCHEZ	PO BOX 6626	BOISE	ID	USA	83707	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Me		Date: 03/25/2014				
W 103454		Name (type o		Title: Assistant				
Processed 03/25/2014 * Electronically provided signatures are accepted as original signatures.								