| No. <b>W 38586</b>                                   |                                                                 | Due no later than Apr 30, 2012 Annual Report Form                                                                                             |      | 2. Registered Agent and Address (NO PO BOX)             |         |             |  |
|------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------|---------------------------------------------------------|---------|-------------|--|
| Return to: SECRETARY OF STATE                        |                                                                 |                                                                                                                                               |      | DONNA PARRISH<br>319 N 1ST                              |         |             |  |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | TM MARKERPLACE<br>J. DEL CARLO MUL<br>319 N 1ST                 | 1. Mailing Address: Correct in this box if needed.  TM MARKERPLACE LLC J. DEL CARLO MULTILINGUAL COMPUTING, INC. 319 N 1ST SANDPOINT ID 83864 |      | SANDPOINT ID 83864  3. New Registered Agent Signature:* |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE             |                                                                 |                                                                                                                                               |      |                                                         |         |             |  |
| 4. Limited Liability Companies: Ent                  | er Names and Addresses of a                                     | at least one Member or Manager.                                                                                                               |      |                                                         |         |             |  |
| Office Held Name                                     |                                                                 | Street or PO Address                                                                                                                          | City | State                                                   | Country | Postal Code |  |
| MEMBER MULTILINGUAL COMPUTING INC 319 N 1ST          |                                                                 | SANDPOINT                                                                                                                                     | ID   | USA                                                     | 83864   |             |  |
| 5. Organized Under the Laws of:                      | Organized Under the Laws of:  6. Annual Report must be signed.* |                                                                                                                                               |      |                                                         |         |             |  |
| ID                                                   | Signature: Jennifer                                             | Signature: Jennifer Del Carlo                                                                                                                 |      | Date: 02/09/2012                                        |         |             |  |
| W 38586                                              | Name (type or prin                                              | Name (type or print): Jennifer Del Carlo                                                                                                      |      | Title: Cfo                                              |         |             |  |
| Processed 02/09/2012                                 | * Electronically provide                                        | * Electronically provided signatures are accepted as original signatures.                                                                     |      |                                                         |         |             |  |