

No. <b>W 84481</b>		<b>Due no later than Jun 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  TNA, LLC KIM OSTROM 208 ACADEMY DRIVE SUITE 130 EAGLE ID 83616 USA		TODD OSTROM 208 ACADEMY DRIVE SUITE 130 EAGLE ID 83616			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
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	
MEMBER	ADRIAN BOER	472 S 200 W	JEROME	ID	USA	83338	
MEMBER	TODD OSTROM	585 WASHINGTON ST N	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:  <b>ID</b> <b>W 84481</b>		6. Annual Report must be signed.*  Signature: Todd Ostrom Name (type or print): Todd Ostrom					
		Date: 05/06/2015 Title: member					
Processed 05/06/2015		* Electronically provided signatures are accepted as original signatures.					