No. <b>W 92337</b>	Due no later than Apr 30, 2016	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.	TOBY C MEADE 6132 THOMPSON RD			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	KLINES T.M. LLC TOBY C MEADE 6132 THOMPSON RD	MARSING ID 83639-8031  3. New Registered Agent Signature:*			
	MARSING ID 83639-8031				
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Companies: Enter Na	ames and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MEMBER JOE D MEA	ADE 232 3RD AVE WEST	MARSING	ID	USA	83639
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: TOBY C. MEADE	Date: 03/15/2016			
W 92337	Name (type or print): TOBY C. MEADE	Title: OWNER			
Processed 03/15/2016	* Electronically provided signatures are accepted as original signatures.				