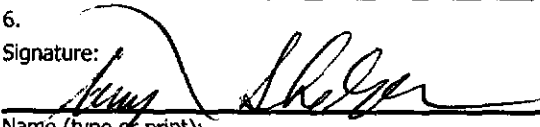


**FILED EFFECTIVE**

No. <b>W 5371</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 04/09/2012</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> T.J.T. ENTERPRISES L.L.C. TERRY SHELDON <del>843 N WASHINGTON</del> <i>P.O. Box 216</i> EMMETT ID 83617 USA		TERRY SHELDON <i>801 Mill Rd.</i> <del>843 N WASHINGTON</del> EMMETT ID 83617																																			
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>		3. <u>New</u> Registered Agent Signature.																																				
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <table border="1"><thead><tr><th>Manager or Member</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td><td><i>Terry Sheldon</i></td><td><i>P.O. Box 216</i></td><td><i>Emmett, Id.</i></td><td><i>83617</i></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	<i>Terry Sheldon</i>	<i>P.O. Box 216</i>	<i>Emmett, Id.</i>	<i>83617</i>			Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 5371</b>	6. Signature:  Name (type or print): <u><i>Terry Sheldon</i></u>		Date: <u><i>5-19-2012</i></u> Title: <u><i>Manager</i></u> <u><i>Member</i></u>																																			

Issued 05/15/2012 by LJC

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**