No. W 153523		Due no later than Jul 31, 2018		2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. OTM, LLC TAOLINE OAAS 4695 SAVANNAH LN BOISE ID 83714 USA			TAOLINE OAAS 4695 SAVANNAH LN BOISE ID 83714 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar			least one Member or Manager					
Office Held	Name	nes and hadresses of ac	Street or PO Address		City	State	Country	Postal Code
MANAGER TAOLINE OA		AS	4695 SAVANNAH LN		BOISE	ID	USA	83714
5. Organized Under the Laws of: ID W 153523		6. Annual Report must be signed.* Signature: Taoline Oaas Name (type or print): Taoline Oaas			Date: 07/05/2018 Title: Manager			
Processed 07/05/2018 * Electronically provided signatures are accepted as original signatures.								