No. <b>W 80775</b>		Due no later than Jan 31, 2016 Annual Report Form  1. Mailing Address: Correct in this box if needed.  TSSM, LLC TIMOTHY E DOERR  8854 W EMERALD ST., SUITE 140 BOISE ID 83704		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080					TIMOTHY E DOERR  8854 W EMERALD ST., SUITE 140 BOISE ID 83704  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar			t least one Member or Manager					
Office Held	Name	nes and Addresses of a	Street or PO Address		City	State	Country	Postal Code
MEMBER MEMBER	TIMOTHY E DOERR JARED P TADJE		901 N CURTIS RD #501 901 N CURTIS RD #501		BOISE BOISE	ID ID	USA USA	83706 83706
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 80775		Signature: Michael Montgomery Name (type or print): Michael Montgomery			Date: 11/17/2015 Title: Accountant			
Processed 11/17/2015 * Electronically provided signatures are accepted as original signatures.								