

No. <b>W 120525</b>	<b>Due no later than Jan 31, 2016</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>  TAP THERAPIES, LLC PAUL DYE 36 WINN DR SUITE 100 REXBURG ID 83440-5277		PAUL DYE 36 WINN DR SUITE 100 REXBURG ID 83440-5277				
<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 MANAGER	Name TODD R ANDERSON	Street or PO Address 180 N BROADWAY	City BLACKFOOT	State ID	Country USA	Postal Code 83221-2203	
5. Organized Under the Laws of:  <b>ID</b> <b>W 120525</b>	6. Annual Report must be signed.*  Signature: Paul Dye Name (type or print): Paul Dye						
Processed 11/16/2015	* Electronically provided signatures are accepted as original signatures.						
	Date: 11/16/2015 Title: Owner						