No. W 94265 Return to:		Due no later than Jun 30, 2011 Annual Report Form 1. Mailing Address: Correct in this box if needed. TJ'S CAFE L.L.C. W TODD COUMBE 1667 TALACHE RD SAGLE ID 83860		W TODD	2. Registered Agent and Address (NO PO BOX) W TODD COUMBE 1667 TALACHE RD SAGLE ID 83860 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				SAGLE ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	W TODD CO	DUMBE	1667 TALACHE	SAGLE	ID	USA	83860	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: W. To		Date: 07/11/2011				
W 94265		Name (type or p		Title: Owner				
Processed 07/11/2011	* Electronically provided signatures are accepted as original signatures.							