No. W 25796		Due no later than Sep 30, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. T & B, LLC BRENDA K. STIBAL 1432 N 1000 E SHELLEY ID 83274			2. Registered Agent and Address (NO PO BOX) BRENDA STIBAL 1432 N 1000 E SHELLEY ID 83274 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				1432 N 100 SHELLEY ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	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	
Manager Manager		REN STIBAL RAVIS STIBAL	1432 N 1000 E 1432 N 1000 E	SHELLEY SHELLEY	ID ID		83274 83274	
5. Organized Under the Laws of:		6. Annual Report i						
ID W 25796		Signature: Brenda Stibal			Date: 09/10/2018			
		Name (type or print): Brenda Stibal			Title: Manager			
Processed 09/10/2018		* Electronically pro	vided signatures are accepted as origina	l signatures.				