

No. W 172097		Due no later than Sep 30, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TD SHIPP LLC 3631 MOUNT OLYMPUS WAY TWIN FALLS ID 83301		TODD SHIPP 3631 MOUNT OLYMPUS WAY TWIN FALLS ID 83301-8330			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	JENNIFER SHIPP	3631 MOUNT OLYMPUS WAY	TWIN FALLS	ID	USA	83301	
MEMBER	TODD SHIPP	3631 MOUNT OLYMPUS WAY	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID W 172097		6. Annual Report must be signed.* Signature: todd shipp Name (type or print): todd shipp					
		Date: 07/21/2017 Title: member					
Processed 07/21/2017 * Electronically provided signatures are accepted as original signatures.							