

No. W 58383	Due no later than Jan 31, 2014 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TAMARA'S LLC TAMARA WELLS 7759 HUETTER POST FALLS ID 83854		TARARA WELLS 7759 HUETTER POST FALLS ID 83854			
			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	TAMARA WELLS	7759 HUETTER	POST FALLS	ID	USA	83854
5. Organized Under the Laws of: ID W 58383		6. Annual Report must be signed.* Signature: Tamara Wells Name (type or print): Tamara Wells Date: 01/02/2014 Title: Member				
Processed 01/02/2014		* Electronically provided signatures are accepted as original signatures.				