

No. W 20836	Due no later than Sep 30, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) TERRY B EASTMAN 10137 N STRAHORN RD HAYDEN ID 83835-8381
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. TJ SQUARED, L.L.C. PO BOX 2557 HAYDEN ID 83835		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	TERRY B EASTMAN	10137 N. Strahorn Rd	Hayden	ID	USA	83835
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	John P. McGladee	19256 S. Watson Rd	Chula	Id	USA	83814
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Gerald F. Thompson	60704 Maple Court	Hayden	Id	USA	83835
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 20836</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <u><i>Terry B Eastman</i></u> </td> <td style="width: 40%;"> Date: <u>8/4/17</u> </td> </tr> <tr> <td> Name (type or print): <u>TERRY B EASTMAN</u> </td> <td> Title: <u>MEMBER</u> </td> </tr> </table>	Signature: <u><i>Terry B Eastman</i></u>	Date: <u>8/4/17</u>	Name (type or print): <u>TERRY B EASTMAN</u>	Title: <u>MEMBER</u>
Signature: <u><i>Terry B Eastman</i></u>	Date: <u>8/4/17</u>				
Name (type or print): <u>TERRY B EASTMAN</u>	Title: <u>MEMBER</u>				