No. W 19271	Due no later than May 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			THAYNE KETTERLING			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. LT & CB, LLC THAYNE KETTERLING 233 EDWARDS DR			233 EDWARDS DR TWIN FALLS ID 83301			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			TWINTALLS	TWINTALLS ID 65501			
	TWIN FALLS ID 83301		3. <u>New</u> Register	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER THAYNE KETTERLING		233 EDWARDS DR	TWIN FALLS	ID		83301	
5. Organized Under the Laws of:	of: 6. Annual Report must be signed.*						
ID	Signature: Thayne Ketterling		Date	Date: 04/23/2015			
W 19271	Name (type or print): Thayne Ketterling		Title	Title: Managing member			
Processed 04/23/2015	* Electronically provided signatures are accepted as original signatures.						