

No. <b>W 137736</b>		<b>Due no later than May 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  TCT RISK SOLUTIONS, LLC RANDY C THOMPSON 92 S HARLAN PL EAGLE ID 83616		RANDY THOMPSON 92 S HARLAN PL EAGLE ID 83616			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
MANAGER	RANDY C THOMPSON	92 S HARLAN PL	EAGLE	ID	USA	83616	
MANAGER	PATTI A THOMPSON	92 S HARLAN PL	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  <b>DE</b> <b>W 137736</b>		6. Annual Report must be signed.*  Signature: Donna Jensen Name (type or print): Donna Jensen					
		Date: 03/27/2018 Title: Office Manager					
Processed 03/27/2018		* Electronically provided signatures are accepted as original signatures.					