No. C 115545		Due no later than Jun 30, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. JTM SQUARED, INC. JAY B THOMSON 838 MAIN ST LEWISTON ID 83501		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				435 KNOLLCF LEWISTON I	JAY B THOMSON 435 KNOLLCREST COURT LEWISTON ID 83501 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		acc Addresses of Dres	ident Corretory, and Directors Trees	surer (entional)				
Office Held	Name	ess Addresses of Pres	Street or PO Address	City	State	Country	Postal Code	
SECRETARY TAMARA L THOMSON DIRECTOR JAY B THOMSON		435 KNOLLCREST COURT 435 KNOLLCREST COURT	LEWISTON LEWISTON	ID ID	USA USA	83501 83501		
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 115545		Signature: Tami Thomson			Date: 04/24/2013			
		Name (type or pri		Title: Secretary				
Processed 04/24/2013		* Electronically provid	led signatures are accepted as origina	al signatures.				