No. W 100821	Due	2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form		TAMMI BAL	TAMMI BALISZEWSKI			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. TAMMI JO PRODUCTIONS, LLC TAMMI BALISZEWSKI 619 W WATER GROVE DR			619 W WATER GROVE DR EAGLE ID 83616			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			EAGLE ID				
	EAGLE ID 83616		3. <u>New</u> Registe	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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 TAMMI J BALISZEWSKI		619 W WATER GROVE DR	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:	ganized Under the Laws of: 6. Annual Report must be signed.*						
CA	Signature: Tammi Baliszewski			Date: 03/06/2012			
W 100821	Name (type or print): Tammi Baliszewski			Title: Member			
Processed 03/06/2012	* Electronically provided signatures are accepted as original signatures.						