No. W 18944		Due no later than Apr 30, 2015		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JOSEPH A TOLUSE 7809 CAMAS ST BOISE 83709-1726 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. THREAT MANAGEMENT TRAINING, LLC. JOSEPH A TOLUSE 7809 CAMAS ST BOISE ID 83709-1726		BOISE 8				
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Com	panies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	JOSEPH A	ΓOLUSE	7809 CAMAS ST	BOISE	ID		83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 18944		Signature: Joseph A. Toluse			Date: 02/14/2015			
		Name (type o		Title: Manager				
Processed 02/14/2015		* Electronically provided signatures are accepted as original signatures.						