

No. W 46440		Due no later than Jan 31, 2015		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. TOM AMEN, LLC TOM AMEN 335 SKYLINE DR POCATELLO ID 83204		TOM AMEN 335 SKYLINE DR POCATELLO 83204	
				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	TOM AMEN	335 SKYLINE DR	POCATELLO	ID	83204
5. Organized Under the Laws of: ID W 46440		6. Annual Report must be signed.* Signature: Tom Amen Name (type or print): Tom Amen Date: 12/10/2014 Title: owner			
Processed 12/10/2014		* Electronically provided signatures are accepted as original signatures.			