

No. J 2778	Due no later than Oct 31, 2018 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. HIGH MOUNTAIN ART GLASS LIMITED LIABILITY PARTNERSHIP PAMELA ANDERSON 321 WOODLAND DR ST MARIES ID 83861		PAMELA ANDERSON 321 WOODLAND DR ST MARIES ID 83861-8210			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PARTNER	PAMELA ANDERSON	321 WOODLAND DR	ST MARIES	ID		83861-8210
PARTNER	MICHAEL ANDERSON	321 WOODLAND DR	ST MARIES	ID		83861
5. Organized Under the Laws of: ID J 2778		6. Annual Report must be signed.* Signature: Pamela Anderson Name (type or print): Pamela Anderson Date: 08/22/2018 Title: partner				
Processed 08/22/2018		* Electronically provided signatures are accepted as original signatures.				