

No. L 6717		Due no later than Aug 31, 2016 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		1. Mailing Address: Correct in this box if needed. BLESSED ASSURANCE, LLLP RICHAD E HENRY 800 FALLS AVE STE 2 TWIN FALLS ID 83301		RICHARD E HENRY 800 FALLS AVE STE 2 TWIN FALLS ID 83301			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
Office Held	Name	Street or PO Address		City	State	Country	Postal Code
GENERAL PARTNER	RICHARD E HENRY	800 FALLS AVE STE 2		TWIN FALLS	ID	USA	83301
GENERAL PARTNER	DEBRA J HENRY	800 FALLS AVE STE 2		TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID L 6717		6. Annual Report must be signed.* Signature: RICHARD E HENRY Name (type or print): RICHARD E HENRY Date: 06/20/2016 Title: GENERAL PARTNER					
Processed 06/20/2016		* Electronically provided signatures are accepted as original signatures.					