

No. J 973		Due no later than Mar 31, 2017 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. M.A. BERRETT FAMILY PARTNERSHIP, LLP SCOTT BERRETT 635 S. CENTER ST. WELLSVILLE UT 84339		CRAE BERRETT 2891 SHELLEY POCATELLO ID 83201			
NO FILING FEE IF RECEIVED BY DUE DATE				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	ANALEE MCDONALD	2129 S. 5100 W.	TAYLOR	UT	USA	84401	
PARTNER	SCOTT BERRETT	635 S. CENTER ST.	WELLSVILLE	UT	USA	84339	
5. Organized Under the Laws of: ID J 973		6. Annual Report must be signed.* Signature: Scott Berrett Name (type or print): Scott Berrett Date: 01/26/2017 Title: Partner					
Processed 01/26/2017 * Electronically provided signatures are accepted as original signatures.							