

No. J 973		Due no later than Mar 31, 2017		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		CRAE BERRETT 2891 SHELLEY POCATELLO ID 83201			
		1. Mailing Address: Correct in this box if needed. M.A. BERRETT FAMILY PARTNERSHIP, LLP SCOTT BERRETT 635 S. CENTER ST. WELLSVILLE UT 84339		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:		6. Annual Report must be signed.*					
ID J 973		Signature: Scott Berrett			Date: 01/26/2017		
		Name (type or print): Scott Berrett			Title: Partner		
Processed 01/26/2017		* Electronically provided signatures are accepted as original signatures.					