

No. J 554	Due no later than Sep 30, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		WILLIAM L PRICE 402 MAIN AVE S TWIN FALLS ID 83301			
	PRICE RENTALS LLP WILLIAM L PRICE 402 MAIN AVE S TWIN FALLS ID 83301		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	WILLIAM L PRICE	1615 BEL AIR CIRCLE	TWIN FALLS	ID	USA	83301
PARTNER	CHERI L PRICE	1615 BELAIR CR	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID J 554	6. Annual Report must be signed.* Signature: bill price Name (type or print): bill price		Date: 07/25/2016 Title: part			
Processed 07/25/2016		* Electronically provided signatures are accepted as original signatures.				