

No. L 3370		Due no later than Feb 29, 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. TIM J. SHAW FAMILY LIMITED PARTNERSHIP TIM J SHAW 49 CORRAL CREEK RD CASCADE ID 83611		TIM J SHAW 49 CORRAL CREEK RD CASCADE ID 83611			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
Office Held GENERAL PARTNER	Name TIM J. SHAW INC.	Street or PO Address TIM SHAW HEREFORDS, 49 CORRAL CREEK RD.		City CASCADE	State ID	Country USA	Postal Code 83611
5. Organized Under the Laws of: ID L 3370	6. Annual Report must be signed.* Signature: Tim J. Shaw Name (type or print): Tim J. Shaw			Date: 02/04/2016 Title: General partner			
Processed 02/04/2016	* Electronically provided signatures are accepted as original signatures.						