

No. L 4837		Due no later than Apr 30, 2013		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		MITCHELL MANSANAREZ 89 WEST 450 NORTH BLACKFOOT ID 83221		
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*		
		MIRROR IMAGE, LLP MITCHELL MANSANAREZ 89 WEST 450 NORTH BLACKFOOT ID 83221				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER	MITCHELL MANSANAREZ	89 W. 450 N.	BLACKFOOT	ID	USA	83221
GENERAL PARTNER	KELLY A MASANAREZ	89 W. 450 N.	BLACKFOOT	ID	USA	83221
5. Organized Under the Laws of: ID L 4837		6. Annual Report must be signed.* Signature: Kelly Mansanarez Name (type or print): Kelly Mansanarez Date: 02/14/2013 Title: Partner				
Processed 02/14/2013		* Electronically provided signatures are accepted as original signatures.				