

|                                                                                                                                                        |              |                                                                                                                                                          |       |                                                              |         |                    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------|---------|--------------------|--|
| No. <b>J 930</b>                                                                                                                                       |              | <b>Due no later than Oct 31, 2017</b>                                                                                                                    |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>           |         |                    |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |              | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>LAND PARTNERS, LLP<br>SIDNEY A AMYX<br>13967 W. WAINWRIGHT DR STE 102<br>BOISE ID 83713 |       | TODD AMYX<br>13967 W WAINWRIGHT DR STE 102<br>BOISE ID 83713 |         |                    |  |
|                                                                                                                                                        |              |                                                                                                                                                          |       | 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                                                                                                                                                | TODD AMYX    | 13967 W. WAINWRIGHT DR STE 102                                                                                                                           | BOISE | ID                                                           | USA     | 83713              |  |
| PARTNER                                                                                                                                                | CHAD CROCKER | 13967 W. WAINWRIGHT DR STE 101                                                                                                                           | BOISE | ID                                                           | USA     | 83713              |  |
| 5. Organized Under the Laws of:                                                                                                                        |              | 6. Annual Report must be signed.*                                                                                                                        |       |                                                              |         |                    |  |
| <b>ID<br/>J 930</b>                                                                                                                                    |              | Signature: Sidney Amyx                                                                                                                                   |       |                                                              |         | Date: 09/18/2017   |  |
|                                                                                                                                                        |              | Name (type or print): Sidney Amyx                                                                                                                        |       |                                                              |         | Title: Book Keeper |  |
| Processed 09/18/2017                                                                                                                                   |              | * Electronically provided signatures are accepted as original signatures.                                                                                |       |                                                              |         |                    |  |