

No. <b>J 2407</b>		<b>Due no later than Jun 30, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  DAMASCO & ASSOCIATES, LLP 700 MONTE VISTA LN HALF MOON BAY CA 94019		JUDE DAMASCO 314 S RIVER ST STE 201 HAILEY ID 83333			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	JUDE DAMASCO	700 MONTE VISTA LN		HALF MOON BAY	CA	94019	
PARTNER	JULIA M DAMASCO	700 MONTE VISTA LN		HALF MOON BAY	CA	94019	
5. Organized Under the Laws of:  <b>CA</b> <b>J 2407</b>		6. Annual Report must be signed.*  Signature: Marian E. Edwards Name (type or print): Marian E. Edwards					
		Date: 04/29/2016 Title: CFO					
Processed 04/29/2016		* Electronically provided signatures are accepted as original signatures.					