


No. J 1718	Reinstatement Annual Report Form LLP REVOKED 06/14/2011		2. Registered Agent and Office (NOT A P.O. BOX) MIKE GALINDO 12770 BALLARD RD POCATELLO ID 83202																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CALF COUNTERS L.L.P. MIKE GALINDO RR 2 BOX 183 POCATELLO ID 83202		3. <u>New</u> Registered Agent Signature.																					
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners. <table border="1"> <thead> <tr> <th>Partners</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td></td> <td>Mike Galindo</td> <td>12770 Ballard Rd</td> <td>Pocatello</td> <td>ID</td> <td>USA</td> <td>83202</td> </tr> <tr> <td></td> <td>Janet Galindo</td> <td>12770 Ballard Rd</td> <td>Pocatello</td> <td>ID</td> <td>USA</td> <td>83202</td> </tr> </tbody> </table>				Partners	Name	Street or PO Address	City	State	Country	Postal Code		Mike Galindo	12770 Ballard Rd	Pocatello	ID	USA	83202		Janet Galindo	12770 Ballard Rd	Pocatello	ID	USA	83202
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5. Organized Under the Laws of: IDAHO J 1718		6. Signature:  Date: <u>12-30-15</u> Name (type or print): <u>Mike Galindo</u> Title: <u>Partner</u>																						

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office