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| No. L 3382 | | Due no later than Mar 31, 2018 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. LENZI FAMILY LIMITED PARTNERSHIP LOIS M LENZI 244 S VILLA PLACE BOISE ID 83712-8362 | | LOIS M LENZI 244 S VILLA PLACE BOISE ID 83712-8362 | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | | |
| Office Held GENERAL PARTNER | Name LOIS M LENZI | Street or PO Address 244 S VILLA PLACE | | City BOISE | State ID | Country USA | Postal Code 83712-8362 | |
| 5. Organized Under the Laws of: ID L 3382 | 6. Annual Report must be signed.* Signature: Lois M Lenzi Name (type or print): Lois M Lenzi | | Date: 02/02/2018 Title: General Partner | | | | | |
| Processed 02/02/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |