| No. J 2747 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Due no later than Jun 30, 2018 Annual Report Form | | | Registered Agent and Address (NO PO BOX) JOSEPH ALBERT SCHACHER | | | | |
|--|----------------------------------|---|--|---------------|---|----------|---------|----------------|--|
| | | 1. Mailing Address: Correct in this box if needed. JOE'S ARTWORKS, LLP JOE SCHACHER 2109 2ND ST LEWISTON ID 83501 | | LE | 2109 2ND ST LEWISTON ID 83501 3. New Registered Agent Signature:* | | | | |
| | | USA | | | | | | | |
| 4. Limited Liability Partne | rships: Enter N | ames and Busine | ss Addresses of two (2) or more partners | 5. | | | | | |
| Office Held | Name | | Street or PO Address | City | / | State | Country | Postal Code | |
| PARTNER PARTNER | JOE SCHACHER JACKSON SCHACHER | | 2109 2ND ST 2109 2ND ST | | VISTON VISTON | ID ID | | 83501 83501 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | | |
| ID J 2747 | | Signature: Joe Schacher | | | Date: 04/21/2018 | | | | |
| | | Name (type or print): Joe Schacher | | | Title: Partner | | | | |
| Processed 04/21/2018 | | * Electronically | provided signatures are accepted as origin | nal signature | S. | | | | |