

|  |            |  |        |   |         |             |  |
|--|------------|--|--------|---|---------|-------------|--|
| No. <b>L 4131</b>  |            | <b>Due no later than Aug 31, 2016</b>  |        | <b>2. Registered Agent and Address (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>CON PAULOS FAMILY LIMITED PARTNERSHIP<br>CON P PAULOS<br>P. O. BOX 5856<br>TWIN FALLS ID 83303-5856 |        | CON PAULOS<br>251 EAST FRONTAGE ROAD SOUTH<br>JEROME ID 83338 |         |             |  |
|  |            |  |        | 3. <u>New</u> Registered Agent Signature:*                    |         |             |  |
| Office Held  | Name       | Street or PO Address   | City   | State   | Country | Postal Code |  |
| GENERAL PARTNER  | CON PAULOS | 251 EAST FRONTAGE ROAD SOUTH   | JEROME | ID  | USA     | 83338       |  |
| 5. Organized Under the Laws of:<br><b>ID<br/>L 4131</b>  |            | 6. Annual Report must be signed.*<br>Signature: Con P. Paulos<br>Name (type or print): Con P. Paulos<br>Date: 10/12/2016<br>Title: President                         |        |   |         |             |  |
| Processed 10/12/2016   |            | * Electronically provided signatures are accepted as original signatures.  |        |   |         |             |  |