No. J 1219		Due no later than Dec 31, 2010		2. F	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		I	BRIAN C THOMPSON 23230 GRAPHIC LANE WILDER ID 83676-5902			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. BCKAT PARTNERSHIP, LLP KATHERINE A THOMPSON 23230 GRAPHIC LANE						
		WILDER ID 83676-5902		3. <u>I</u>	3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Partner	ships: Enter N	ames and Business A	Addresses of two (2) or more partners	S.				
Office Held	Name		Street or PO Address	Ci	ty	State	Country	Postal Code
PARTNER PARTNER			23230 GRAPHIC LANE 23230 GRAPHIC LANE		ILDER ILDER	ID ID	USA USA	83676-5902 83676-5902
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID J 1219		Signature: Katherine A Thompson			Date: 11/23/2010			
		Name (type or print): Katherine A Thompson			Title: Partner			
Processed 11/23/2010		* Electronically prov	ided signatures are accepted as origir	nal signatur	es.			