No. L 6769		Annual Report Form 1. Mailing Address: Correct in this box if needed. MGJ & SLJ FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP SHARON JOSSIS PO BOX 348		2. Registered Agent and Address (NO PO BOX)											
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				SHARON JOSSIS 11109 W LA GRANGE ST BOISE ID 83709 3. New Registered Agent Signature:*											
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
								GENERAL PARTNER MICHEAL JOS		SSIS	11109 W LA GRANGE ST	BOISE	ID	USA	83709
GENERAL PARTNER SHARON JOS		SSIS	11109 W LA GRANGE ST	BOISE	ID	USA	83709								
5. Organized Under the Laws of:		6. Annual Report must be signed.*													
ID L 6769		Signature: Share	Date: 09/29/2014												
		Name (type or p	Title: General Partner												
Processed 09/29/2014 * Electronically provided signatures are accepted as original signatures.															