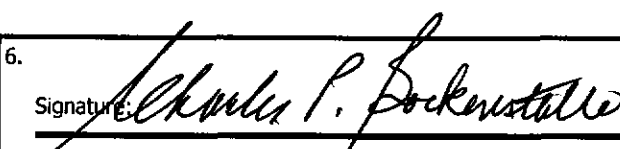


| | | | |
|---|---|--|--|
| No. L 4323 | Reinstatement Annual Report Form ADMIN TERMINATED 04/11/2011 | | 2. Registered Agent and Office (NOT A P.O. BOX) CHARLES P BOCKENSTETTE 3608 VISTA DRIVE NAMPA ID 83686 |
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00 | 1. Mailing Address: Correct in this box if needed. BOCKENSTETTE FAMILY LIMITED PARTNERSHIP CHARLES P BOCKENSTETTE 3608 VISTA DRIVE NAMPA ID 83686 | | 3. <u>New</u> Registered Agent Signature. |

| 4. Limited Partnerships: Enter Names and Business Addresses of general partners. | | | | | | |
|--|-------------------------|----------------------|-------|-------|---------|-------------|
| General Partners | Name | Street or PO Address | City | State | Country | Postal Code |
| | CHARLES P. BOCKENSTETTE | 3608 VISTA DR | NAMPA | ID | CANYON | 83686 |
| | JUDITH A. BOCKENSTETTE | " " " | | | | |

| | |
|---|--|
| 5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO L 4323 </div> | 6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> Signature:  <hr/> Name (type or print): CHARLES P. BOCKENSTETTE </div> <div style="width: 35%; text-align: right;"> Date: 18 APRIL 2011 <hr/> Title: PARTNER </div> </div> |
|---|--|

Issued 04/14/2011 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM