

|  |                  |  |                    |  |         |                        |  |
|--|------------------|--|--------------------|--|---------|------------------------|--|
| No. <b>L 5644</b>  |                  | <b>Due no later than May 31, 2017</b>  |                    | 2. Registered Agent and Address <b>(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>Annual Report Form</b>  |                    | INCorp SERVICES, INC.<br>1310 S VISTA AVE STE 27<br>BOISE ID 83705 |         |                        |  |
|  |                  | <b>1. Mailing Address: Correct in this box if needed.</b>  |                    | 3. <u>New</u> Registered Agent Signature:*                         |         |                        |  |
|  |                  | MASLYN FAMILY L.P.<br>BARBARA A MASLYN<br>2151 ROUTE 96E<br>CLIFTON SPRINGS NY 14432                       |                    |  |         |                        |  |
| Office Held  | Name             | Street or PO Address   | City               | State  | Country | Postal Code            |  |
| GENERAL PARTNER  | BARBARA A MASLYN | 2151 ROUTE96E  | CLIFTON<br>SPRINGS | NY   | USA     | 14432                  |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>L 5644</b>  |                  | 6. Annual Report must be signed.*<br>Signature: Barbara A Maslyn<br>Name (type or print): Barbara A Maslyn |                    |  |         |                        |  |
|  |                  |  |                    | Date: 05/30/2017   |         | Title: General partner |  |
| Processed 05/30/2017   |                  | * Electronically provided signatures are accepted as original signatures.                                  |                    |  |         |                        |  |