No. L 2603	1	Due no later than Dec 31, 2015 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX)	
Return to:	Annual Report Form		MARILYN A BRUNEEL	
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. BRUNEEL FAMILY LIMITED PARTNERSHIP MARILYN A BRUNEEL 4690 BEACON AVE EMMETT ID 83617-9602		4690 BEACON AVE EMMETT ID 83617	
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature.	
4. Limit	ed Par	tnerships: Enter Names and Business Addresse	es of general nartners	
General Partners		ame Street or PO Address City	State Country Postal Code	
Marilyn Br	પ મ ર	+1 4690 Beacon Au En	my ett, Ida Gen 83417	
		el 4992 NGoodenfolm		
Melane Ha	rpe	~ 1240 Sucker G. R.L	-Homedule, Idu owike 83428	
5. Organized Under the Lav	vs of:	6.	<del></del>	
IDAHO L 2603		Signature:  Nicerity Brune!  Name (type or print)	Date:  Out 32, 2013  Title:	
		Marilyn Braneel	Managen	
Issued 10/14/2015 by TLB			115980	
INST	RUC	TIONS FOR THE IDAHO ANNUA	L REPORT FORM	
Block 1: Entity name may correct mailing address is no corrected address must be i	t given	e altered through the use of this form. Pay special in Block 1, strike it out and write in the correct addres lock 1.	all attention to the mailing address. If the is. <b>Note:</b> To ensure future mailings, the	
<b>Block 2:</b> To change the region of the registered agent must	stered a	agent or office, strike the incorrect information and wr street address in Idaho, <b>not a Post Office Box or P</b>	ite in the correct information. <b>Note:</b> The office	
Block 3: Only a <u>new</u> registe			· · · · · · · · · · · · · · · · · · ·	
Block 4: Enter names and b	usiness	addresses of general partners. Note: <u>DO NOT</u> put " nges here will not affect the address in Block 1.	same as last year" or "same as above". If more space is needed please add an	
Block 5: May not be altered	through	n the use of this form.		

Block 6: The annual report must be signed by a person authorized to represent the limited partnership. Print or type the name of the signer below the signature.

\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.

If the limited partnership is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the limited partnership to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections?

POSTMARK DATES WILL NOT BE ACCEPTED