No. <b>L 4993</b>	Due no later than Jan 31, 2015	2. Registered Agent and Address (NO PO BOX)
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address: Correct in this box if need  IVYL W. WELLS FAMILY LIMITED PARTNERSHIP  IVYL W WELLS  1255 NORTH 18TH EAST	STE. 200 MERIDIAN 83642
NO FILING FEE IF RECEIVED BY DUE DATE	MOUNTAIN HOME ID 83647	3. <u>New</u> Registered Agent Signature:*
Office Held Name	Street or PO Address	City State Country Postal Code
GENERAL PARTNER IVYL V	WELLS 1255 NORTH 18TH EAST	MOUNTAIN HOME ID USA 83647
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: Ivyl Wells	Date: 11/19/2014
L 4993	Name (type or print): Ivyl Wells	Title: General Partner
Processed 11/19/2014 * Electronically provided signatures are accepted as original signatures.		