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| No. L 4357 | Reinstatement Annual Report Form ADMIN TERMINATED 06/08/2007 | | 2. Registered Agent and Office (NOT A P.O. BOX) JOHN A WALSH 5514 WEST LAKE RIVER LN BOISE ID 83703 2964 S. Rockway LN Boise, ID 83706 |
| 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. EMERALD STREET LIMITED PARTNERSHIP 5514 WEST LAKE RIVER LN BOISE ID 83703 AKA: CHARLES GIOVINO, CPA 4040 PALOS VEDES DRIVE NORTH SUITE 202 ROLLING HILLS ESTATES, CA 90274 | | 3. New Registered Agent Signature. |
| 4. Limited Partnerships: Enter Names and Business Addresses of general partners. | | | |
| Office Held | Name | Street or PO Address | City State Country Postal Code |
| <i>General Partner</i> | <i>JAMES GIOVINO</i> | CHARLES GIOVINO, CPA 4040 PALOS VEDES DRIVE NORTH SUITE 202 ROLLING HILLS ESTATES, CA 90274 | |
| 5. Organized Under the Laws of: IDAHO L 4357 | | 6. Signature: <i>[Signature]</i> Date: <i>5-18-10</i> Name (type or print): <i>JAMES GIOVINO</i> Title: <i>General Partner</i> | |
| Issued 05/14/2010 by SLD | | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM