No. L 6145 Return to:		Due no later than Sep 30, 2014 Annual Report Form			2. Registered Agent and Address (NO PO BOX) KEITH M HANSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KEITH AND MABEL HANSEN FAMILY LLLP KEITH HANSEN 2735 CENTRAL AVE		2735 CENTRAL AVE AMMON ID 83406				
NO FILING FEE IF RECEIVED BY DUE DATE		AMMON ID 83406		3. <u>New</u> Registered Agent Signature:*				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER	KEITH M HANSEN LIVING TRUST		2735 CENTRAL AVE	AMMON	ID	USA	83406	
GENERAL PARTNER GENERAL PARTNER			2735 CENTRAL AVE 2735 CENTRAL AVE	AMMON AMMON	ID ID	USA USA	83406 83406	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Keith Hansen		Date: 08/05/2014				
L 6145		Name (type or print): Keith Hansen		Title: Trustee of Genl Ptr				
Processed 08/05/2014 * Electronically provided signatures are accepted as original signatures.								