No. L 3389		Due no later than Mar 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. JTM, L.P. MICHAEL G MCBRIDE PO BOX 5096 TWIN FALLS ID 83303		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				675 RIVERVIE TWIN FALLS	MICHAEL G MCBRIDE 675 RIVERVIEW TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE			Circle POALL	67	- CI 1			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER GENERAL PARTNER	MICHAEL G JANET K MO		PO BOX 5096 PO BOX 5096	TWIN FALLS TWIN FALLS	ID ID	USA USA	83303 83303	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID L 3389		Signature: MICHAEL		Date: 01/2	Date: 01/22/2018			
		Name (type or print): MICHAEL		Title: ger	Title: general manager			
Processed 01/22/2018	* Electronically provided signatures are accepted as original signatures.							