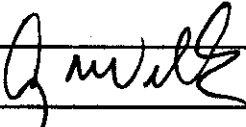


No. J 38	Due no later than December 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX THOMAS B HIGH 126 2ND AVE N TWIN FALLS, ID 83301
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable BENOIT, ALEXANDER, HARWOOD, HIGH & THOMAS B HIGH 126 2ND AVE N TWIN FALLS, ID 83301		3. <u>New</u> Registered Agent Signature

4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGING PARTNER	ANTHONY M. VALDEZ	P.O. Box 366	TWIN FALLS	ID	83303
PARTNER	T. ROBERT ALEXANDER	"	"	"	"
PARTNER	ROBERT M. HARWOOD	"	"	"	"
PARTNER	THOMAS B. HIGH	"	"	"	"

5. Organized Under the Laws of: IDAHO J 38	6. <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Signature  Name (Typed or Printed) <u>ANTHONY M. VALDEZ</u> </div> <div style="width: 35%;"> Date <u>10.10.08</u> Title <u>MANAGING PARTNER</u> </div> </div>
---	---