No. J 2068		Due	2. Registered Agent and Address (NO PO BOX)					
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF		Due no later than Apr 30, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. CARLQUIST LIMITED LIABILITY PARTNERSHIP J DOUGLAS CARLQUIST 955 VALLEY RD S EDEN ID 83325 USA		R LYNN CARLQUIST 1092 SOUTH 2500 EAST HAZELTON ID 83335 3. New Registered Agent Signature:*				
4. Limited Liability Partne		ames and Business	Addresses of two (2) or more partners.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PARTNER PARTNER PARTNER	TNER J DOUGLAS CARLQUIST		1092 SOUTH 2500 EAST 955 VALLEY RD S 10523 NORTH EDINBURGH DRIVE	HAZELTON EDEN HIGHLAND	ID UT	USA USA USA	83335 83325 84004	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: J. Douglas Carlquist			Date: 02/14/2013			
J 2068		Name (type or p		Title: Partner				
Processed 02/14/2013		* Electronically pro	vided signatures are accepted as original si	gnatures.				