Return to:	Due no later than Apr 30, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. ESTLE AND LEXI TRAUGHBER FAMILY LIMITED PARTNERSHIP (THE) THE TRAUGHBER FAMILY LLC BOX 133 IRWIN ID 83428	2. Registered Agent and Office (NOT A P.O. BOX) ESTLE A TRAUGHBER BOX 133 IRWIN ID 83428 3. New Registered Agent Signature.
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		
NO FILING FEE IF RECEIVED BY DUE DATE		
4. Limi	ited Partnerships: Enter Names and Business Addresse	es of general partners.
General Partners	Name Street or PO Address City	State Country Postal Code
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WYWAGE	Lexi TRAUGHOR POBOX 133-	10 50 83490
5. Organized Under the La		
5. Organized Under the La	ws of: 6. Signature:	Date:
i		Date: <u>03-13-14</u> Title:
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