No. <b>L 3542</b>		Due no later than Nov 30, 2009			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.			MICHELLE PETERSEN SOVINE  351 E 5TH S  REXBURG ID 83440			
				1.				
700 WEST JEFFERSC PO BOX 83720 BOISE, ID 83720-008		L & L LEGACY LIMITED PARTNERSHIP MICHELLE PETERSEN SOVINE 351 E 5TH S REXBURG ID 83440		3	3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		KEADORG II	J 05110		or <u>mem</u> Regione	ned rigene of	gridiai	
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
GENERAL PARTNER MP MANAGE		MENT	351 EAST 5TH SOUTH		REXBURG	ID	USA	83440
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID L 3542		Signature: Michelle Petersen Sovine Date: 09/14/2009						
		Name (type or print): Michelle Petersen Sovine Title: Managing Partner					er	
Processed 09/14/2009	-	* Electronically	provided signatures are accepted as origin	nal signa	tures.			