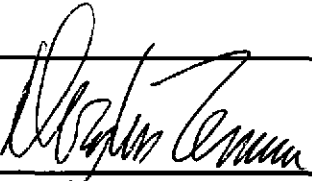


No. J 1172 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Due no later than Jul 31, 2014 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) DOUGLAS TAMMURA 1124 SANTA MARIA BOISE ID 83712 3. <u>New</u> Registered Agent Signature.																					
1. Mailing Address: Correct in this box if needed. EASTGATE, LLP JANE EVANS 929 S. CAPITOLA WAY BOISE ID 83712																							
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Partners</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>PARTNER</td> <td>DOUGLAS TAMMURA</td> <td>1124 SANTA MARIA</td> <td>BOISE</td> <td>ID</td> <td>USA</td> <td>83712</td> </tr> <tr> <td>PARTNER</td> <td>BOISE EASTGATE INC.</td> <td>1124 SANTA MARIA</td> <td>BOISE</td> <td>ID</td> <td>USA</td> <td>83712</td> </tr> </tbody> </table>			Partners	Name	Street or PO Address	City	State	Country	Postal Code	PARTNER	DOUGLAS TAMMURA	1124 SANTA MARIA	BOISE	ID	USA	83712	PARTNER	BOISE EASTGATE INC.	1124 SANTA MARIA	BOISE	ID	USA	83712
Partners	Name	Street or PO Address	City	State	Country	Postal Code																	
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PARTNER	BOISE EASTGATE INC.	1124 SANTA MARIA	BOISE	ID	USA	83712																	
5. Organized Under the Laws of: <div style="text-align: center;">IDAHO J 1172</div>	6. Signature:  Date: <u>MAY 9, 2014</u> <hr/> Name (type or print): <u>DOUGLAS TAMMURA</u> <hr/> Title: <u>PARTNER</u>																						

Issued 05/09/2014 by JLI

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of at least two (2) partners. **Note: DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1.** If more space is needed please add an attachment.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability partnership. Print or type the name of the signer below the signature.

**** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the limited liability partnership is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the limited liability partnership to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? _____

POSTMARK DATES WILL NOT BE ACCEPTED