



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 07/31/2021

Annual Report: No filing fee if received by the due date.

Port Form

Return completed form within 30 days to to the lidaho Secretary of State

Idaho Secretary of Star Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

	ımber: 3563927	Filing Status: Active-Existing			n Ca
Limited Liability	Company (D)	Date Formed: 07/12/2019	Formation L	ocale: ID	P.J.
Name and Mail genuity drywall II PO BOX 815 KUNA, ID 8363	dc		(1) Add or Change Mailing	g Address:	3:14 PM
Registered Agent (RA) and Registered Office (RO) Address: ABEL G LOZANO 1266 N CABRILLO AVE 2725 A FIRWWOL ST MERITARY B3634 (2) Change RA and/or RO Address: Meridian to \$3646					
Note: The Registered Office address must be a physical Idaho address (no postal box).					
(3) New Registered Agent (RA) Signature: If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.					
(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.					
Manager/Member	Name	Business Address	0 =	City, State, Zip	
Mgr Mem	Abril Wans	P.O. 150-2	815	Kun (F)	5363 H
Mgr Mem					
(5) Signature: (6) Date: $3-9-2$					17 m
(7) Type/Print Name: Holl ocano (8) Title: Maus Sel					

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

Denney