



## STATE OF IDAHO

*Office of the secretary of state, Phil McGrane*  
**ANNUAL REPORT**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$0.00

*For Office Use Only*

-FILED-

File #: 0005977861

Date Filed: 11/12/2024 9:38:07 AM

| Entity Name and Mailing Address:   |   |  |       |                  |  |         |  |
|--|---|--|-------|------------------|--|---------|--|
| Entity Name:   | Idaho Local Home Inspections LLC  |  |       |                  |  |         |  |
| The file number of this entity on the records of the Idaho Secretary of State is:  | 0005430175  |  |       |                  |  |         |  |
| Address  | 1904 S ATLANTIC ST<br>BOISE, ID 83705-3205  |  |       |                  |  |         |  |
| Entity Details:  |   |  |       |                  |  |         |  |
| Entity Status  | Active-Existing   |  |       |                  |  |         |  |
| This entity is organized under the laws of:  | IDAHO   |  |       |                  |  |         |  |
| If applicable, the old file number of this entity on the records of the Idaho Secretary of State was:  |   |  |       |                  |  |         |  |
| The registered agent on record is:   |   |  |       |                  |  |         |  |
| Registered Agent   | <p>REGISTERED AGENTS INC<br/>Commercial Registered Agent</p> <p>Physical Address<br/>784 S CLEARWATER LOOP STE R<br/>POST FALLS, ID 83854</p> <p>Mailing Address<br/>784 S CLEARWATER LOOP STE R<br/>POST FALLS, ID 83854</p> |  |       |                  |  |         |  |
| Agent or Address Change  |   |  |       |                  |  |         |  |
| <input type="checkbox"/> Select if you are appointing a new agent.   |   |  |       |                  |  |         |  |
| Limited Liability Company Managers and Members   |   |  |       |                  |  |         |  |
| <table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Business Address</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> Joshua D. Cooper</td> <td>Manager</td> <td>1904 S. ATLANTIC STREET<br/>BOISE, ID 83705</td> </tr> </tbody> </table> |   | Name                                       | Title | Business Address | <input checked="" type="checkbox"/> Joshua D. Cooper | Manager | 1904 S. ATLANTIC STREET<br>BOISE, ID 83705 |
| Name   | Title   | Business Address                           |       |                  |  |         |  |
| <input checked="" type="checkbox"/> Joshua D. Cooper   | Manager   | 1904 S. ATLANTIC STREET<br>BOISE, ID 83705 |       |                  |  |         |  |
| The annual report must be signed by an authorized signer of the entity.  |   |  |       |                  |  |         |  |
| Job Title: President   |   |  |       |                  |  |         |  |
| <i>Joshua Cooper</i>   |   |  |       |                  |  |         |  |
| <input type="checkbox"/> Sign Here   |   |  |       |                  |  |         |  |
| <i>11/12/2024</i>  |   |  |       |                  |  |         |  |
| <input type="checkbox"/> Date  |   |  |       |                  |  |         |  |