

Sign and date this form and return to the address provided above.



## Idaho Limited Liability Company Annual Report Form

	File online at: SOSBIZ.ida	•		Return completed form within 30 days to Idaho Secretary of State	
	Due on/Before: 12/31/2018	Reporting Year: 2018	Attn: Annual	•	بر.
Annual Report: No filing fee if received by due date.  If reinstatement is required, the reinstatement fee is \$30.00.  700 West 450 North Boise, ID 8				Jefferson, E205	
					N N
			Phone: (208)		
SOS Contro	Number: 275802	Filing Status: Active-Existing			2
Limited Liabil	ity Company (D)	Date Formed: 12/03/2009	Formation I	.ocale: ID	α
Name and M	lailing Address:	(1)	Add or Change Mailin	g Address:	2
IDAHO WILE	GINGER LLC				40
	TAIN ROSE DR				2
IDAHO FALL	.S, ID 83402				13
					<u>አ</u>
Registered /	Agent (RA) and Registered	Office (RO) Address: (2)	Change RA and/or RC	Address:	
MICHELLE E	EVA WILLIAMS				Ce 1Ve
3936 GREEN					<u> </u>
BOISE, ID 8	3705				O O
					Ū
	Note: The Registe	ered Office address must be a physical I	daho address (no po	stal box).	×
(3) New Reg	istered Agent (RA) Signatu	re:			Ŀ
		and addresses of Managers OR Mem	bers. Do NOT put 's	ame as last vear' or 'same as ab	
These will not	be accepted. Changes here will	I not affect the entity mailing address.	If more space is nee	eded, please add an attachment.	. O
Manager/Membe		Business Address		City, State, Zip	C
Mgr ✓Men	ELECTOR A LABOR DE LA CO	etler 1577 Mountain	Rose Dr.	Edaholalls, ID8340	
Mgr Men					—— <u>₽</u>
Mgr Men					<u>ب</u>
Mgr Men					
Mgr Men	· · · · · · · · · · · · · · · · · · ·				<del></del> -
Mgr Mem					
☐Mgr ☐Men					<u>ੂ</u> ਜ
	2/ 0				<u>9</u> 2
(5) Signature:	Theren Brown	or Butte (6)	Date: 11 19 1	9	Ø
(7) Type/Print Na	ame: Bevery Brown	Butlan (8)	Title: Manage	en/Member	Į.
Instructions: L		nclose a check made pavable to the idal	71		Ž