



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 12/31/2019

port Form

Return completed form within 30 days to:
Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise ID 65

Annual Report: No filing fee if received by the due date.				Boise, ID 83720 Phone: (208) 334-2300	
		Filing Status: Activ Date Formed: 12/3	-	Formation Locale: ID	2019
DEVONSHIRE PO BOX 2013	iling Address: 12488 LLC ID 83877-2013		(1) Add or	Change Mailing Address:	9:23 AM
Registered Ag ELISABETH M 14089 N CHUF RATHDRUM, I	OORE RCH RD D 83858	ed Office (RO) Address:		e RA and/or RO Address:	Received by
(4) Limited Liabili	tered Agent (RA) Signa ity Companies: Enter nam accepted. Changes here	If a new agent is appoint and addresses of Manage	rs OR Members.	the new agent must sign here to accept the Do NOT put 'same as last year' or 'sa e space is needed, please add an at	ame as above'.
Manager/Member Name		Business A	Business Address		
Mgr	Elisabeth Moo	RE P.O. BO	¥ 2013	Post Falls, IN	838 # 7-
(5) Signature: (7) Type/Print Name	clisabeth Elisabeth	MOORE	(6) Date:	12-4-19 Owner	awerence
Instructions: Legi	ibly complete the form above	Sign and date this form and retu	rn to the address pr	wided shove	н