



Idaho Limited Liability Company Annual Report Form

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port Form For Office Use Only

Return complet _FILED_ 30 days to:
Idaho Secretary c

Due no later than: 02/28/2022				Attn: Anr ^F	Idaho Secretary c	
Annual Report: No filing fee if received by the due date.					Boise, I <u>D 83720</u> Phone: (208) 334-2300	
SOS Control Nu			iling Status: Active-Exis	_		202
Limited Liability Company (D)			Date Formed: 02/02/2015 Formation Locale:		Locale: ID	<u>N</u>
Name and Maili	_		(1) Add or Change Mailing Address:			1 2
LAZY TEACUP		.				
5259 OLD RIVE						Ŋ
KINGSTON, ID	63638-87 IU					AM
Registered Age RICHARD REED 5259 OLD RIVE KINGSTON, ID	D R RD	Registered Office	e (RO) Address:	(2) Change RA and/or	RO Address:	Received
	ered Agent (F	RA) Signature: Enter names and a	If a new agent is appointed in ddresses of Managers OR ffect the entity mailing add	item (2) above, the new ager Members. Do NOT put	t must sign here to accept the	me as 20 ove'.
	Name		Business Addre	SS	City, State, Zip	9.1
Mgr Mem	Richard	Reed	5259 Old R	Liver Rd	Kingston, ID	8383 9
Mgr Mem Mgr Mem Mgr Mem Mgr Mem	Debra	Reed	5259 Old	River Rd	Kingston, IN	83835
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(5) Signature:	Richard	Resd		(6) Date: 3-3	-22	2 We re
(7) Type/Print Name	Richar	d Reed		(8) Title: Man	ager / Membe	5√ G ⊒
Instructions: Leail	bly complete the	form above. Sign and	d date this form and return to	the address provided above	<u>.</u> 3 .	п п