



AL SEAL	Idaho Limited Liability Company Annual Report Form			
Annual Bon	Due on/Before: 11/30/2018	Reporting Year: 201	Return completed form w Idaho Secretary of State Attn: Annual Reports 700 West Jefferson, E205	ယ vithin 30 days to ပြ
	ent is required, the reinstater	450 North 4th Street Boise, ID 83702 Phone: (208) 334-2300	Boise, ID 83702 Phone: (208) 334-2300	
	Number: 20002 ty Company (D)	Filing Status: Active-Existin Date Formed: 11/20/1996	Formation Locale: ID	018
Name and March & W LAND, 1852 ALTURATION FALLS	AS DR	:	(1) Add or Change Mailing Address: (A) A ADD (B) West Mague	
Registered A CLAYTON DU 1852 ALTUR TWIN FALLS	AS DR	Office (RO) Address:	Sho Shon, I (2) Change RA and/or RO Address: Watter Dunlop 960 West Magic Ros Shoshone, ID 83	
(4) Limited Liab	stered Agent (RA) Signatur	and addresses of Managers OR Me	al Idaho address (no postal box). embers Do NOT put 'same as last yea	r' or 'same as above'
Manager/Membe		Business Address	City, State, Z	
Mgr Mem	Connie Duni Amy Dun		lagic Boad#3 Shoshon as Dr. WinFalls	
Mgr Mem (5) Signature:			(6) Date: (2) 19, 201	¥ 0
(7) Type/Print Na	- VACE LEV - D (AV	nclose a check made payable to the i	(8) Title: \(\sigma\), daho Secretary of State for \$30 if reinstate	
		Thona= lop 208-720-	# 3327	Lence Denney