

Idaho Limited Liability Company Annual Report Form

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For Office Use Only



Return completed form within 30 days to:

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

Annual Banari, Na filing foo if received by the due date

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Annua	Report: No filing fee	e if received by	y the due date.		Due no later tha	an: 12/31/202 2 (
_		-	Status: Active-E	_		1 0
Limited Liability Company (D) Date		Date F	Formed: 12/22/2011 Formation Locale: ID			<u></u>
Name and Mai	ling Address:			(1) Add or Chan	ge Mailing Address:	
RIDPATH 2 LLC						
825 OLD HIGH						Ç
PLUMMER, ID	83851-9778					C
	ent (RA) and Registe	red Office (RC)) Address:	(2) Change RA	and/or RO Address:	ž
VIVIEN L DENI						
825 OLD HIGH						Γ -
PLUMMER, ID	00001					
						i
	Note: The Re	gistered Office a	ddress must be a p	ohysical Idaho addres	s (no postal box).	t
(3) New Regist	tered Agent (RA) Sigi	nature:				h.
(c) Non Negle			new agent is appointed	d in item (2) above, the ne	ew agent must sign here to acce	pt the appointment.
(4) Limited Liabili	ity Companies: Enter na	mes and addres	ses of Managers	OR Members. Do No	OT put 'same as last year'	or 'same as above'.
These will not be	accepted. Changes her	e will not affect t	he entity mailing a	address. If more spa	ce is needed, please add	an attachment.
Manager/Member	Name	Business Add	Iress	City, State, Zip	City, State, Zip	
Mgr Mem	Vivien L.	Denny	825 Old	High Way	95 Plummer	, to 83851
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(5) Signature:	Vincer	2 L. H) enruf	(6) Date: /	1-22-22	
(7) Type/Print Nam	ie: Vivien	L. De	nny	(8) Title:	anager	ļ.
Instructions: Leg	gibly complete the form above	ve. Sign and date	ノ this form and return	to the address provide	d above.	(