

Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

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

For Office Use Only

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Annual Report: No filing fee if received by the due date.					Due no later than: 12/31/2022	
			Status: Active-Existing Formed: 12/30/2013 Formation Locale: ID		ormation Locale: ID	2022
Name and Mail RLK KAMIAH T 100 YOUNG RE KAMIAH, ID 83	WO LLC		(1) Add or Change Mailing Address:			9:07 AM
Registered Age ROBERT KARF 100 YOUNG RE KAMIAH, ID 83)	tered Office (F	RO) Address:	(2) Change F	RA and/or RO Address:	M Received
(3) New Regist	Note: The	ignature:	address must be a ph		ress (no postal box). e new agent must sign here to accept the appointm	by Off
(4) Limited Liabilit These will not be	ty Companies: Enter accepted. Changes h	names and addrenere will not affect	ct the entity mailing ac	dress. If more:	NOT put 'same as last year' or 'same as space is needed, please add an attachme	above n
Manager/Member	Name		Business Addr		City, State, Zip	~~
Mgr Mem (5) Signature:	H8 Nay	ARPE Do	(00 YOUNG	(6) Date: [1-14-22	she Idano Secretary
(7) Type/Print Nam	· Rob Kai	RPE		(8) Title:	wrep-MEM	`

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.