

SOS Control Number: 428863

Limited Liability Company (D)

Name and Mailing Address: **SERVICE LIGHTING LLC** 

(3) New Registered Agent (RA) Signature:

Name

IDAHO FALLS, ID 83401

ROBERT PURCELL 6337 E TWIN CREEK DR IDAHO FALLS, ID 83401

Manager/Member

X Mgr Mem

Mgr Mem Mgr Mem

Mgr Mem Mgr Mem

Mgr Mem Mgr Mem

Mgr Mem Mgr Mem Mgr Mem

Mgr Mem

(7) Type/Print Name:

(5) Signature:

PO BOX 2111



## Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov Due no later than: 08/31/2019

B0357-0307 Return completed form within 30 days Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720 Annual Report: No filing fee if received by the due date. Phone: (208) 334-2300 Filing Status: Active-Existing Date Formed: 08/04/2014 Formation Locale: ID (1) Add or Change Mailing Address: Ø (2) Change RA and/or RO Address: Registered Agent (RA) and Registered Office (RO) Address: Received Note: The Registered Office address must be a physical Idaho address (no postal box). γ If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment. (4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment. ø City, State, Zip **Business Address** Toloho Folls M Ω. o Ø ₩ (6) Date: ٦

(8) Title:

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

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