



Idaho Limited Liability Company Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 02/28/2018

Reporting Year: 2017

Return completed form within 30 days to

Idaho Secretary of State

Attn: Annual Reports

700 West Jefferson, E205

450 North 4th Street

Boise, ID 83702

Phone: (208) 334-2300

Annual Report: No filing fee if received by due date.

If reinstatement is required, the reinstatement fee is \$30.00.

SOS Control Number: 539054

Filing Status: Inactive-Dissolved
(Administrative)

☒ Reinstatement Entity (\$30 fee)

Limited Liability Company (D)

Date Formed: 02/08/2017

Formation Locale: ID

Name and Mailing Address:

MILLER TEAM LLC (THE)
6939 W WINSTON LN
BOISE, ID 83704

(1) Add or Change Mailing Address:

2411 E Mardian St
Meridian ID 83642

Registered Agent (RA) and Registered Office (RO) Address:

NO AGENT
AGENT RESIGNED OR INVALID
BOISE, ID 83702 (ADA)

(2) Change RA and/or RO Address:

Deidre Miller
3411 E Mardian St
Meridian ID 83642

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

(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.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Deidre Miller	3411 E Mardian St Meridian ID	83642
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Adam Miller	3411 E Mardian St	Meridian ID 83642
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

(6) Date:

11/16/18

(7) Type/Print Name:

Deidre Miller

(8) Title:

Owner Mgr

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.

B0027-5394 11/27/2018 1:00 PM Received by ID Secretary of State Lawrence Denney