



# Idaho Limited Liability Company Annual Report Form

File online at: [sosbiz.idaho.gov](https://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

**-FILED-**

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Due no later than: 03/31/2024

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

**SOS Control Number:** 5164199

**Filing Status:** Active-Existing

**Limited Liability Company (D)**

**Date Formed:** 03/21/2023

**Formation Locale:** ID

### Name and Mailing Address:

UMAI Craft LLC  
APT J103  
739 E STATE ST  
EAGLE, ID 83616-5975

(1) Add or Change Mailing Address:

815 Nectarine Street  
Nampa, ID 83686

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

CHIKAKO OYAMA  
739 E STATE ST APT J103  
EAGLE, ID 83616

(2) Change RA and/or RO Address:

815 Nectarine St.  
Nampa, ID 83686

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

### (3) New Registered Agent (RA) Signature:

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.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	CHIKAKO OYAMA	815 Nectarine St Nampa ID 83686	
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

(6) Date:

3-12-24

(7) Type/Print Name:

CHIKAKO OYAMA

(8) Title:

OWNER/MGR

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

B0876-5776 03/12/2024 2:02 PM Received by Office of the Idaho Secretary of State