



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 04/30/2019

Return completed form within 30 days to:

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

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Annua	iaie.	Boise, ID 83720 Phone: (208) 334-2300				
	umber: 600844	Filing Status: Act	· · · · · · · · · · · · · · · · · · ·			
Foreign Limited	F	Formation Locale: VIRGINIA				
Name and Mailing Address: ALLEGIANCE MANAGEMENT LLC				(1) Add or Change Mailing Address:		
4354 W CENTRAL RD EMMETT, ID 83617				2609 Morse Lane Woodbridge, VA 22192		
Registered Ag AARON WELLI 4354 W CENTF EMMETT, ID 8	(2) Change	(2) Change RA and/or RO Address:				
(4) Limited Liabili	ty Companies: Enter name accepted. Changes here w	If a new agent is app and addresses of Manag	gers OR Members. Do ling address. If more	NOT put 's	nust sign here to accept the ame as last year' or 'sa eded, please add an att City, State, Zip	ime as above'. achment.
Mgr ⊠Mem	Aaron welli		W Central	red	Emmett, ID	83WI7 6
Mgr						tary of State
(5) Signature:			(6) Date:	5-2	3-19	Lawe
(7) Type/Print Name	" Desple	My	(8) Title: (9 (1/10	Wille	
Instructions: Legi	bly complete the form above.	Sign and date this form and n	eturn to the address prov	ided above.	0	rence