



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 09/30/2021

Nort Form

Return completed form within 30 days to: A ldaho Secretary of State

Attn: Annual Reports

Annual Report: No filing fee if received by the due date.			Boise, ID	450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 269554 Limited Liability Company (D)		Filing Status: Active-Exist	_	n I ocale: ID	6
		Date Formed: 09/01/2009 Formation Locale: ID (1) Add or Change Mailing Address:		<u> </u>	
Name and Mailing Address: HARRY CAREY, LLC			None		
523 W EDWARDS AVE			7-0100		Ü
NAMPA, ID 83	686-2857				7
Registered Age CAREY LYTLE 523 W EDWAR NAMPA, ID 836	DS AVE	Office (RO) Address:	ice (RO) Address: (2) Change RA and/or RO Address:		
	ered Agent (RA) Signatu	If a new agent is appointed in ite	m (2) above, the new age	ent must sign here to accept the app	
These will not be	accepted. Changes here wi	and addresses of Managers OR M Il not affect the entity mailing addre	ess. If more space is	needed, please add an attac	
<u> </u>	Name	Business Address		City, State, Zip	
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(5) Signature:	Ca Little		(6) Date: 9.37	·3(
(7) Type/Print Name	E Carry Lyth		(6) Date: 9.37 (8) Title: M.A	r	
Instructions: Leg	/ ibly complete the form above. S	Sign and date this form and return to the	address provided above	/e .	" C