





## **STATE OF IDAHO**

Office of the secretary of state, Phil McGrane ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00 For Office Use Only

-FILED-

File #: 0005534361

Date Filed: 1/3/2024 6:58:13 AM

| Entity Name and Mailing Address:  |                     |                                       |              |
|---|---------------------|---------------------------------------|--------------|
| Entity Name:  |                     | Mountain Mamas Coffee L.L.C.          |              |
| The file number of this entity on the records of the Idaho Secretary of State is:   |                     | 0005110312                            |              |
| Address   |                     | MOUNTAIN MAMAS COFFE                  | E            |
|   |                     | 541 BLUE SKY DR                       |              |
|   |                     | KUNA, ID 83634-2117                   |              |
| Entity Details:   |                     |                                       |              |
| Entity Status   |                     | Active-Existing                       |              |
| This entity is organized under the laws of:   |                     | IDAHO                                 |              |
| If applicable, the old file number of this entity the Idaho Secretary of State was: | y on the records of |                                       |              |
| The registered agent on record is:  |                     |                                       |              |
| Registered Agent  |                     | Gabrielle Reid                        |              |
|   |                     | Registered Agent                      |              |
|   |                     | Physical Address                      |              |
|   |                     | 2108 S ATLANTIC ST<br>BOISE, ID 83705 |              |
|   |                     | Mailing Address                       |              |
|   |                     | 2107 S ATLANTIC ST                    |              |
|   |                     | BOISE, ID 83705                       |              |
| Agent or Address Change   |                     |                                       |              |
| Select if you are appointing a new agen   | nt.                 |                                       |              |
| Limited Liability Company Managers and Members                                      |                     |                                       |              |
| Name  | Title               | Rueir                                 | ness Address |
|   |                     |                                       | iess Address |
| Abbigail Boyd   | Manager             | ABBIGAIL BOYD<br>541 BLUE SKY DR      |              |
|   |                     | KUNA, ID 83634                        |              |
| Gabrielle Reid  | Manager             | 2108 S ATLANTIC ST                    |              |
| Gabitelle Neid  | Manager             | BOISE, ID 83705                       |              |
|   |                     |                                       |              |
| The annual report must be signed by an authorized signed Job Title: Owner           | er of the entity.   |                                       |              |
|   |                     |                                       |              |
| Abbigailband  |                     |                                       | 01/02/2024   |
| Abbigail boyd   |                     |                                       | 01/03/2024   |
| Sign Here   |                     |                                       | Date         |