



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 11/30/2020

Sort Form Return completed form within 30 days to: On Idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports

			450 North 4th Street	
Annua	Report: No filing fee if re	ceived by the due date.	Boise, ID 83720 Phone: (208) 334-2300	(A)
SOS Control Number: 77848		Filing Status: Active-Existing		
Limited Liability Company (D)		Date Formed: 11/14/2002	Formation Locale: ID	N 2
Name and Mailing Address:		(1) Add or Change Mailing Address:		<u>ر</u>
HAMPTON ENTERPRISE, LLC 1225 N 900 E				N
SHELLEY, ID	83274-5106			٠ <u>-</u>
Registered Ag	ent (RA) and Registered C	office (RO) Address: (2) (2)	Change RA and/or RO Address:	<u>ح</u> ح 0
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1225 N 900 E				
SHELLEY, ID	83274			5 5 7
	Note: The Register	ed Office address must be a physical Id:	aho address (no postal box).	Ď
(3) New Regis	tered Agent (RA) Signature	e:		F
		If a new agent is appointed in item (2)	above the new agent must sign here to accept the a	ppointment.
(4) Limited Liabili These will not be	ity Companies: Enter names a accepted. Changes here will i	nd addresses of Managers OR Memb not affect the entity mailing address. I	ers. Do NOT put 'same as last year' or 'sal f more space is needed, please add an atta	me as above of achment.
Manager/Member	Name (VAIN)	Business Address	City, State, Zip	
Mgr Mem	Julie HAMPYON	1225 N. 900E	Sheeley Id 8	3274
Mgr Mem	A. Mussell Hamp	ton 1225 N900E	Sheller In 8	3274
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(5) Signature:	whie home He	amotor (6) D	Date: 10/24/2020	
(7) Type/Print Name: Judio LYNN Hampton (8) Tit			itle: Member/Manager	
Instructions: Leg	ibly complete the form above. Sig	n and date this form and return to the addr	ess provided above. 50/50	