



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 09/30/2020

Return completed form within 30 days to:

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

| Annual Report: No filing fee if received by the due date. | | | | Boise, ID 83720 Phone: (208) 334-2300 | |
|---|--|---|---------------------------------------|--|--|
| | | Filing Status: Active-Exist | ng Formation Locale: ID | | |
| Name and Mail YA-YA EXPRES PO BOX 99 MALAD CITY, I | ling Address: SS LLC | | (1) Add or Change Maili | ng Address: | |
| Registered Agent (RA) and Registered Office (RO) Address: EARL D BROOKS 1716 S 4700 W | | | (2) Change RA and/or RO Address: | | |
| MALAD CITY, I | D- 83252 (ONEIDA COUNTY) Note: The Registered 0 | Office address must be a physi | | ew, Id. 83252 (oneida Compostal box). | |
| (4) Limited Liabili | | If a new agent is appointed in ite addresses of Managers OR M | Members. Do NOT put | must sign here to accept the appointment. 'same as last year' or 'same as above'. | |
| These will not be accepted. Changes here will not affect the entity mailing Manager/Member Name Business Ad | | Business Addres | · · · · · · · · · · · · · · · · · · · | | |
| Mgr Mem | Earl D. Brooks Brenda Brook | 1716Sa. 4 | 700W. | Pleasantview. Id 83 Pleasantview. Id 83 | |
| (5) Signature: | al V De | neo D | (6) Date: $9-9$ | 4.20 | |
| (7) Type/Print Name | Earl & Brooks | | (8) Title: (2) | 124 | |

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