



Idaho Limited Liability Partnership Annual Report Form

File online at: sosbiz.idaho.gov



Return completed form within 30 days to:

Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise, ID 83720
Phone: (208) 334-2300

For Office Use Only

-FILED-

File #: 0005641030

Date Filed: 3/7/2024 11:22:00 AM

Annual Report: No filing fee if received by the due date.

Due no later than: 03/31/2024

SOS Control Number: 4853
Limited Liability Partnership (D)

Filing Status: Active-Existing
Date Formed: 03/13/2001

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

ALEXACON LLP
PO BOX 3127
KETCHUM, ID 83340-3121

Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

LINDA D WOODCOCK
371 W RIVER ST UNIT 5
KETCHUM, ID 83340

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Partnerships: Enter names and addresses of 2 or more Partners. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Name	Business Address	City, State, Zip
LINDA D. WOODCOCK	P.O. Box 3127	Ketchum, Id. 83340
Kirsten N. Terna	P.O. Box 3127	Ketchum, Id. 83340
Lindsey A. Woodcock	P.O. Box 3127	Ketchum, Id. 83340

(5) Signature: Linda D. Woodcock

(6) Date: 3/4/24

(7) Type/Print Name: LINDA D. WOODCOCK

(8) Title: manager Alexacon LLP

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

0876-5168 03/07/2024 11:22 AM Received by Office of the Idaho Secretary of State