



Idaho Limited Liability Company 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 #: 0005059904
Date Filed: 1/9/2023 11:32:00 AM
Due no later than: 01/31/2023

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

SOS Control Number: 3752006
Limited Liability Company (D)

Filing Status: Active-Existing
Date Formed: 01/22/2020

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

MAGA SOLUTIONS LLC
APT 101
5812 W CLEARVIEW LN
BOISE, ID 83703-3075

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

(2) Change RA and/or RO Address:

VINCENT B VIDEgain
5812 W CLEARVIEW LN APT 101
BOISE, ID 83703

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 Companies: Enter names and addresses of Managers OR Members. 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.

| Manager/Member | Name | Business Address | City, State, Zip |
|--|------------------|---------------------------|-------------------|
| <input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem | VINCENT VIDEgain | 5812 W. Clearview LN #101 | Boise Idaho 83703 |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |

(5) Signature: *V. Videgain*

(6) Date: *01/09/2023*

(7) Type/Print Name: *Vincent Videgain*

(8) Title: *Mgr*

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

B0758-3410 01/09/2023 11:32 AM Received by Office of the Idaho Secretary of State