





## 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 #: 0005287803

Date Filed: 6/19/2023 2:34:38 PM

| Entity Name and Mailing Address: Entity Name: The file number of this entity on the records of the Idaho Secretary of State is: Address |                       | GT Contracting LLC<br>0004832228<br>128 S EAGLE RD<br>STE 200<br>EAGLE, ID 83616-5984 |  |            |  |
|---|-----------------------|---|--|------------|--|
|   |                       | LAOLL,  | 10 000 10-0004                               |            |  |
| Entity Details:   |                       | A ativa E   |  |            |  |
| Entity Status   |                       | Active-Existing   |  |            |  |
| This entity is organized under the laws of:   |                       |   | IDAHO  |            |  |
| If applicable, the old file number of this entity of the Idaho Secretary of State was:  | on the records of     |   |  |            |  |
| The registered agent on record is:  |                       |   |  |            |  |
| Registered Agent  |                       |   | ABRAMS LAW PLLC Pagintered Agent             |            |  |
|   |                       |   | Registered Agent                             |            |  |
|   |                       | Physical Address<br>800 W MAIN ST   |  |            |  |
|   |                       |   | SUITE 1460                                   |            |  |
|   |                       | BOISE, ID 83702 Mailing Address   |  |            |  |
|   |                       |   |  |            |  |
| Agent or Address Change   |                       |   |  |            |  |
| ☐ Select if you are appointing a new agent.   |                       |   |  |            |  |
| Limited Liability Company Managers and Members  |                       |   |  |            |  |
|   | TIME                  |   | Business Address                             |            |  |
| Name  | Title                 |   | Business Address                             |            |  |
| ■ Mark Thomas   | Manager               |   | 128 S EAGLE RD<br>STE 200<br>EAGLE, ID 83616 |            |  |
| The annual report must be signed by an authorized signer o  | f the entity.         |   |  |            |  |
| Job Title: Manager  | o mornous Paradol y a |   |  |            |  |
|   |                       |   |  |            |  |
| Mark Thomas   |                       |   |  | 06/19/2023 |  |
| Sign Here   |                       |   |  | Date       |  |