

Idaho Limited Liability Company Annual Report Form

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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

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Annual Report: No filing fee if received by the due date.		Due no later than: 09/30/2023			
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_imited Liability	y Company (D)	Date Formed: 09/29/2015	Formation Lo	Formation Locale: ID	
	iling Address: HNSON, L.L.C. 3653-0247	(1) Add or Change Mailing	Address:	
PHILIP A PETI	KLIN RD STE 200 3687	ice (RO) Address: (2 Office address must be a physical	c) Change RA and/or RO		
New Regist	tered Agent (RA) Signature:	if a new agent is appointed in item	(2) above, the new agent (must sign here to accept the appointme.	
Limited Liabili	ty Companies: Enter names and accepted. Changes here will not	If a new agent is appointed in item addresses of Managers OR Me t affect the entity mailing address	mbers. Do NOT put 's	same as last year' or 'same as al eded, please add an attachment	
Limited Liabili ese will not be	ty Companies: Enter names and	if a new agent is appointed in item addresses of Managers OR Me t affect the entity mailing address Business Address	mbers. Do NOT put 's. If more space is ne	same as last year' or 'same as al	
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) Limited Liabilinese will not be anager/Member Mgr Mem	ty Companies: Enter names and accepted. Changes here will not Name Monty Moore-Johns.	If a new agent is appointed in item I addresses of Managers OR Me t affect the entity mailing address Business Address on P.O. Box 156	mbers. Do NOT put 's. If more space is ne	same as last year' or 'same as all eded, please add an attachment City, State, Zip Nampa, ID 83653-0156	