



## **Idaho Limited Liability Company Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 03/31/2021

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Return	completed	l form	within	30	day <del>§ t</del>

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

Annua	I Report: No filing fee if	•	Phone: (208) 334-2300		
SOS Control Number: 314382 Limited Liability Company (D)		Filing Status: Active-Existing Date Formed: 03/23/2011	Formation Locale: ID		2021
Name and Mai BG & JA, LLC 3555 E 4000 N KIMBERLY, ID	•	(1	(1) Add or Change Mailing Address:		
Registered Ag BYRD GOLAY 3555 E 4000 N KIMBERLY, ID		d Office (RO) Address: (2	P) Change RA and/or Ro		Received by
(4) Limited Liabili	ity Companies: Enter name accepted. Changes here w	If a new agent is appointed in item ( es and addresses of Managers OR Men will not affect the entity mailing address	nbers. Do NOT put 's	same as last year or 'sa	me as apove'.
Manager/Member	Name	Business Address		City, State, Zip	<del></del>
Mgr Mem	Byrd Golay	3555 E 40	80 N	Kimberly Ide	- Wary of State Lawe
(5) Signature:	Lyrd Dola	<u>(6</u>	) Date: 3 · 1 ·	21	);; <del>0</del>
(7) Type/Print Nam	e: Byrd Gold	_ <del>/</del> 1 (8	) Title: Maua	-ger	- 1C
Instructions: Lea	ibly complete the form above	Sign and data this form and return to the ac	idrace provided shove	•	н

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