



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 07/31/2021

Dort Form

Return completed form within 30 days to: No lidaho Secretary of State Idaho Secretary of State Attn: Annual Reports

Annua	Report: No filing fee if	received by the due date.	450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300		
SOS Control Number: 61930		Filing Status: Active-Existing		a Lacela ID	6
Limited Liability Company (D)		Date Formed: 07/23/2001	Formatio	Formation Locale: ID	
Name and Mailing Address:			(1) Add or Change Mailing Address:		
MELROSE FAR	·				4
	E, ID 83530-2153				ц
					:
Registered Ag	ent (RA) and Registered	Office (RO) Address:	(2) Change RA and/o	r RO Address:	
JERRY W GIRA	ARD	` '	Dartynn Hu 1215 Stotf Grange Ville	nt	ָ ה
1215 SCOTT S			1216 Sent 4	St.	F 4
GRANGEVILLE	E, ID 83530		1-10/10/19	Th 83530	9
			Grang vive		- -
	Note: The Regist	ered Office address must be a physi	ical idaho address (no	postal box).	×
(3) New Regist	tered Agent (RA) Signati		Lent		E
		If a new agent is appointed in ite	m (2) above, the new ag	ent must sign here to accept the appo	ointment.
(4) Limited Liabili These will not be	ty Companies: Enter names accepted. Changes here wi	and addresses of Managers OR N	Members. Do NOT posss. If more space is	ut 'same as last year' or 'same needed, please add an attach	as above ment.
Manager/Member Name		Business Address	S	City, State, Zip	
Mgr Mem	Darlynn Hunt	1215 Scutt St		Grangeville, Ld	83534
Mgr Mem	t			Q	<u></u>
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(5) Signature:	arlunn Hunt.	PR Gravel Fights	(6) Date: 09-3	0-21	
(7) Type/Print Name	_ 0, 11		(8) Title: 1		1
		ian and data this form and return to the			(
manucuona. Legi	or complete the form above. S	ign and date this form and return to the	audiess provided 800/	VC.	t