



Idaho Corporation Annual Report Form

File online at: sos.idaho.gov

Due no later than: 06/30/2019

Drm Return completed form within 30 days to will lidaho Secretary of State

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

8/8

Annual Report: No filing fee if received by the due date.						Phone: (208) 334-2300	
SOS Conti	rol Number: 620957	Fill	Filing Status: Active-Good Standing) 2
Non-Profit Corporation (D)			Date Formed: 06/15/2015 Formation Locale: ID			ormation Locale: ID	Р
Mame and	Mailing Address:		(1) Add or Change Mailing Address:				
	E OFFICE, INC.				.(//		1
PO BOX 2	·			•			••
	A, ID 83340						4/
,							<u>}</u>
-	d Agent (RA) and Regis	stered Office	(RO) A	ddress:	(2) Change R	A and/or RO Address:	ጟ
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KETCHUN	1, ID 83340		1				176
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	Note: The	Registered Office	ce addres	ss must be a phys	ical idaho addr	ress (no postal box).	-
(2) Nov. De				, ,			λα
(3) New Ke	egistered Agent (RA) Si	ignature:	If a new ag	ent is appointed in i	tem (2) above, the	new agent must sign here to accept the appointme	ent.
(4) Corporation	ons: Enter names and busines						
Title	Name			s Address		City, State, Zip	0.
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(5) Board of	Directors names and business	addresses (with	zip code)	. Attach additional	sheet if necessi	ary.	Á.
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(5) Signature:	Howah 22	em h			(6) Date: S	-29-2019	
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(7) Type/Print	Name: TOSEDH A	< HUM	PHPI	SY	(8) Title:		<u>(0</u>
Inetructions	B: Legibly complete the form a	bove. Sign and	date this 1	form and return to	the address prov	rided above.	_
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