

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

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## For Office Use Only

B0959-6299



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

File #: 0006060674

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Annual Report: No filing fee if received by the due date.  Due no later that					28/2025 🧓
SOS Control Number: 5610574		Filing Status: Active-Existing		on the and a diffe	202
Limited Liability Company (D)		Date Formed: 02/22/2	22/2024 Formation Locale: ID		ப
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809 W 1ST ST					
FRUITLAND, ID 83619-2478					ΡM
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Rebecca J. Wo	· · ·	a Office (RO) Address.	(2) Change for anu/C	or NO Address.	
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FRUITLAND, II					< 0
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	Note: The Regi	stered Office address must be a	physical Idaho address (no	postal box).	λq
(3) New Regist	tered Agent (RA) Signa	fure:			0
(o) New Regis	tored Agent (14A) Oigna		ed in item (2) above, the new ag	ent must sign here to accept the app	pointment H
(4) Limited Liabili These will not be Manager/Member	ity Companies: Enter name accepted. Changes here	es and addresses of Managers will not affect the entity mailing Business Add	address. If more space is	out 'same as last year' or 'same needed, please add an attac	e as above chment.
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(7) Type/Print Nam	e: Rébeccat	5 Woodwor	44 (8) Title: Man	raging Mem	ben
Instructions: Lea	ibly complete the form above	Sign and data this form and return	to the address provided abo		Н

**Instructions:** Legibly complete the form above. Sign and date this form and return to the address provided above

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