



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 09/30/2019

port Form Return completed form within 30 days to: Idaho Secretary of State

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

Annual Report: No filing fee if received by the due date.							Boise, ID 83720 Phone: (208) 334-2300			
SOS Control Number: 210036 Fili			Filing Status:	Active-E	Existing				2	
Limited Liability Company (D) Da			Date Formed:	Formed: 09/04/2007 Formation			ormation	Locale: ID	19	
Name and Mai HUBER AG SE PO BOX 545 JEROME, ID 8	RVICES, LL				(1) Add or	Change Maili	ng Address:	10:44	
Registered Ag	ent (RA) and	d Registered Offi	ice (RO) Addr	ess:	(2) Change	RA and/or R	O Address:	AM R	
GARY T HUBE 501 W AVE G JEROME, ID 8	3338	ote: The Registered	Office address m	uist bo a r	hveical	Idaho ad	idrass (no n	netal hov)	eceived	
(4) Limited Liabili	tered Agent	(RA) Signature:	if a new agent	is appointed	on item (2) above. nbers. [the new agent	must sign here to accept the	ıme as above	
These will not be accepted. Changes here will not affect Manager/Member Name			γ	ess Add			City, State, Zip	Ω Q		
Mgr ☐ Mem	GARY	HUBIE	P.0	BOX	<u>545</u>				83338	
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(5) Signature:	M)	1			. (6)	Date:	9-27-	.19	Laweren	
(7) Type/Print Name	: GADY	HUBA	J		(8)	Title:		ALOW- OWNER	, in	

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