





## **STATE OF IDAHO**Office of the secretary of state, Phil McGrane

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ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00 For Office Use Only

-FILED-

File #: 0005302418

Date Filed: 7/4/2023 9:39:47 AM

| Entity Name and Mailing Address:  |        |            |  |            |
|---|--------|------------|--|------------|
| Entity Name:  |        |            | VECTOR NETWORK SOLUTIONS LLC.                        |            |
| The file number of this entity on the records of the Idaho Secretary of State is:                     |        | 0000623475 |  |            |
| Address   |        |            | 3313 W CHERRY LN PMB 1066<br>MERIDIAN, ID 83642-1119 |            |
| Entity Details:   |        |            |  |            |
| Entity Status   |        |            | Active-Existing                                      |            |
| This entity is organized under the laws of:   |        |            | IDAHO  |            |
| If applicable, the old file number of this entity on the records of the Idaho Secretary of State was: |        |            | W207510  |            |
| The registered agent on record is:  |        |            |  |            |
| Registered Agent  |        |            | CASEY RALLS  |            |
|   |        |            | Registered Agent                                     |            |
|   |        |            | Physical Address<br>8047 HAPPY VALLEY RD             |            |
|   |        |            | KUNA, ID 83634                                       |            |
|   |        |            | Mailing Address                                      |            |
|   |        |            | 8047 HAPPY VALLEY RD                                 |            |
|   |        |            | KUNA, ID 83634-1529                                  |            |
| Agent or Address Change   |        |            |  |            |
| Select if you are appointing a new agent.   |        |            |  |            |
| Limited Liability Company Managers and Members  |        |            |  |            |
| Name  | Title  |            | Business Address                                     |            |
| Casey Ralls   | Member |            | IAPPY VALLEY RD<br>ID 83634                          |            |
|   |        |            |  |            |
| The annual report must be signed by an authorized signer of the entity.  Job Title: Owner             |        |            |  |            |
| Casey Ralls   |        |            |  | 07/04/2023 |
| Sign Here   |        |            |  | Date       |