

Idaho Limited Liability Company Annual Report Form



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 #: 0006101844

Date Filed: 2/7/2025 4:08:00 PM

Annual Report: No filing fee if received by the due date.					Due no later than: 12/31/202			
			g Status: Active-Existing Formed: 12/31/2003 Formation			ocale: ID	2025	
Name and Mail KOBE, LLC 732 N SANTA F BOISE, ID 837	PAULA PL			(1) Add (or Change Mailing	g Address:	4:08 PM	
Registered Age DOUG TAMURA 732 N SANTA F BOISE, ID 837	A PAULA PL 12	gistered Office (RC			ge RA and/or RC		Received by	
(4) Limited Liabilit	ered Agent (RA)	If a n	ew agent is appointe	ed in item (2) abov	e, the new agent n	nust sign here to accep	t the appointment her 'same as above'	
Manager/Member	will not be accepted. Changes here will not affer		Business Address			City, State, Zip	n attachment.	
Mgr Mem	PODG T	Amven Omm	P.O. BC	(6) Date:		BOBE, IP	# Home Idaho secretar	
(7) Type/Print Name	» DODE	7 TAMORA	1	(8) Title:	mEu	1872	٧.	

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

State