



Idaho Limited Liability Partnership Annual Report Form

File online at: sos.idaho.gov

Due no later than: 03/31/2020

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

Annual Report: No filing fee if received by the due date.

SOS Control Number: 3204

Filing Status: Active-Existing

Limited Liability Partnership (D)

Date Formed: 03/24/1999

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

ELITE RIFLE WORKS LLP

4293 E FRANKLIN RD

NAMPA, ID 83687-8485

Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

JIM COMBE

4293 E FRANKLIN RD

NAMPA, ID 83687

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Partnerships: Enter names and addresses of 2 or more Partners. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Name	Business Address	City, State, Zip
Jim Combe	4293 East Franklin Rd.	Nampa Id. 83687
Ray Combe	4293 East Franklin Rd.	Nampa Id. 83687

(5) Signature:

(6) Date:

(7) Type/Print Name:

(8) Title:

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

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