

## Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

## For Office Use Only



Return completed form within 30 days to:

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

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

-FILED-

File #: 0005764724

Date Filed: 6/7/2024 9:51:00 AM

Due no later than: 04/30/2024

SOS Control N Limited Liability	lumber: 3469027 Company (D)	Filing Status: Active-Exico	_	tion Locale: ID	. P. Z. 4
Name and Mailing Address: Ultimate Spatial Design LLC 9098 LIBERTY LN			(1) Add or Change Mailing Address:		
MELBA, ID 836	641-4280				A
Registered Ag	ent (RA) and Registere	d Office (RO) Address:	(2) Change RA and	d/or RO Address:	გ
Clayton` S Aller	• •	a cinco (110) / 1441000.			Gelve
1081 W CREEKBURY DRIVE			CLAYTON S. ALLEN		
MERIDIAN, ID 83646			9078 LIBERTY LANE		
, <del>-</del>			MELBA, 10440 83641-4280		Ω
	Note: The Regis	stered Office address must be a phys	sical Idaho address (	no postal box).	Λq
(3) New Regist	tered Agent (RA) Signat				C
		If a new agent is appointed in i	tem (2) above, the new	agent must sign here to accept the appointmen	<u>"t.                                    </u>
(4) Limited Liabili These will not be	ty Companies: Enter name accepted. Changes here w	s and addresses of Managers OR will not affect the entity mailing add	Members. Do NOT ress. If more space	put 'same as last year' or 'same as abe is needed, please add an attachment.	ove'. በ መ
Manager/Member	Name	Business Addre	SS	City, State, Zip	o
Mgr Mem	CLAYTON S. AL	LEN 9098 LIBER	YLANE	MELBA ID 83641	H
Mgr Mem					
Mgr Mem					
∐Mgr ∐Mem					
∐Mgr ∐Mem					——  <b>⊢</b> •
∐Mgr ∐Mem			****		aa5
☐ Mgr ☐ Mem					— ŏ
				· · · · <del>- · ·</del>	—— v
		114			
Mgr Mem					
					—— u
(5) Signature:	ChyLA	llu-	(6) Date: ##	05/31/2024	—; —;
(7) Type/Print Name	CLAYTON S	ALLEN	(8) Title:	STERED AGENT	o
Instructions: Leg	ibly complete the form above.	Sign and date this form and return to ti	he address provided a	bove.	H,