



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov



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

For Office Use Only

-FILED-

File #: 0005952266

Date Filed: 10/28/2024 3:56:00 PM

Due no later than: 09/30/2024

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

SOS Control Number: 141693

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 09/28/2005

Formation Locale: ID

Name and Mailing Address:

LUCKY PUPS, LLC
STE-300
608 NORTHWEST BLVD
COEUR D'ALENE, ID 83814-2174

(1) Add or Change Mailing Address:

Lucky Pups, LLC
1219 No. 6th St.
Boise, ID 83702

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

ELEVEN-FOURTEEN INC
608 NW BLVD STE 300
COEUR D'ALENE, ID 83814

(2) Change RA and/or RO Address:

Christine B. LaRocco
1219 No 6th St.
Boise, ID 83702

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

(3) New Registered Agent (RA) Signature:

Christine B. LaRocco

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

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. 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.

| Manager/Member | Name | Business Address | City, State, Zip |
|--|-----------------------|----------------------|--------------------|
| <input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem | Lawrence P. LaRocco | 1219 No. 6th St. | Boise, ID 83702 |
| <input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem | Christine B. LaRocco | 1219 No 6th St. | Boise, ID 83702 |
| <input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem | Anna LaRocco-Cockburn | 906 24th Ave. | Seattle, WA 98122 |
| <input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem | Matthew LaRocco | 2525 S.W. Patton Rd. | Portland, OR 97201 |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem | | | |

(5) Signature:

Christine B. LaRocco

(6) Date:

October 25, 2024

(7) Type/Print Name:

Christine B. LaRocco

(8) Title:

Manager

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

B0932-9530 10/28/2024 3:56 PM Received by Office of the Idaho Secretary of State