	Return completed form with	nin 30 days to:			
	Idaho Secretary of State			For Office Use Only	
	Attn: Annual Reports 450 North 4th Street			-FILED-	ì
VETOY	Boise, ID 83720		F	ile #: 0006210669	9
	Phone: (208) 334-2300			ate Filed: 4/17/2025 10:18:00	AM
Annual	Report: No filing fee if rece	ived by the due date.		Due no later than: 03/3	1/20
OS Control Nu	imber: 5172337	Filing Status: Active-Existing			1
mited Liability (	Company (D)	Date Formed: 03/24/2023	Formation	Locale: ID	Ň
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egistered Age	ent (RA) and Registered Off	ice (RO) Address: (2)	Change RA and/or F	RO Address:	
	IAM ACKERLAND	(	•		ĺ
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DISE, ID 8370	06 (ADA COUNTY)		Jun	e	Ì
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	Note: The Registered	Office address must be a physical l	daho address (no p	ostal box).	
		P. J. P. P.	1	,	1
b) New Registe	ered Agent (RA) Signature:	If a new agent is appointed in item (2	) above, the new agent	must sign here to accept the app	
					ointme
) Limited Liability	y Companies: Enter names and	addresses of Managers OR Mem	bers. Do NOT put		
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