



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 07/31/2021

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: 17592

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 07/15/1996

Formation Locale: ID

Name and Mailing Address:

B & L HOLDINGS, LLC
1046 W SHERINGTON DR
EAGLE, ID 83616-7163

(1) Add or Change Mailing Address:

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

LILA TURNER
1046 W SHERINGTON DR
EAGLE, ID 83616

(2) Change RA and/or RO Address:

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 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	Lila Turner	1046 W. SHERINGTON DR	Eagle, Id 83616
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Lila Turner	1046 W. SHERINGTON DR	Eagle, Id 83616
<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			
<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: Lila Turner

(6) Date: June 28, 2021

(7) Type/Print Name: LILA TURNER

(8) Title: Member/Manager

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

B0613-6768 07/01/2021 11:51 AM Received by ID Secretary of State Lawrence Denney