



## **Idaho Limited Liability Company Annual Report Form**

B0596-7045

	File online at: sosbiz.idaho.gov Due no later than: 03/31/2021		Return completed form within 30 days to: Idaho Secretary of State Attn: Annual Reports 450 North 4th Street	
Annua	l Report: No filing fee if r	eceived by the due date.	Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 48789 Limited Liability Company (D)		Filing Status: Active-Existing Date Formed: 03/20/2000	Formation Locale: ID	21
Name and Mailing Address: SIGN ARTS L C 3403 E 800 N		(1) Add or Change Mailing Address:		_4_
				29
MENAN, ID 83	3434-5054			PM
Registered Ag SHIRLEY SAG 3403 E 800 N MENAN, ID 83		Office (RO) Address: (2) (2)	Change RA and/or RO Address:	Received
(4) Limited Liabil	tered Agent (RA) Signatu	the new agent recognited in democra- and addresses of Managers OR Members	drove, the new agent most sign here to access the appearance ers. Do NOT put 'same as last year' or 'same as above f more space is needed, please add an attachment.	ø
Manager/Member	Name	Business Address	City, State, Zip	
Mgr	Shirley Sager	4087 N Haroldsen	Idaho Falls, ID 83401	etary of State
(5) Signature:	Shuly Lag	(6) D	pate: 5-3-2021	Me]
(7) Type/Print Name: Shirley Sager (8) Title: Owner / M			itle: Owner / MGR	- 6 - 7 - 8
Instructions: Leg	gibly complete the form above. Si	ign and date this form and return to the addre	ess provided above.	Lawerence I