



## Idaho Limited Liability Company Annual Report Form

|  |  |  |                            |   | B0027-                                  |  |  |
|--|--|--|----------------------------|---|---|--|--|
|  | daho Limited Liability Company Annual Report Form  |  |                            |   |   |  |  |
|  | File online at: SOSBIZ.idaho                       | File online at: SOSBIZ.idaho.gov   |                            |   | Return completed form within 30 days to |  |  |
|  | ue on/Before: 12/31/2018 Reporting Year: 2018      |  | dano Secre                 | Idaho Secretary of State Attn: Annual Reports |   |  |  |
| Annual Danasta Na filling for if we should be due date   |  | Landa data   | Attn: Annua<br>450 North 4 |   | 12                                      |  |  |
| Annual Report: No filing fee if received by due date.  If reinstatement is required, the reinstatement fee is \$30.00. |  |  |                            | Boise, ID 83702                               |   |  |  |
| II Tellistateili   | ent is required, the remistatem                    | ent lee is \$50.00.  | Phone: (208                | 3) 334-2300                                   |   |  |  |
|  | Number: 404336                                     | Filing Status: Active-Existing   |                            |   | 2                                       |  |  |
| Limited Liabilit   | y Company (D)                                      | Date Formed: 12/23/2013  | Formation                  | Locale: ID                                    | <b>—</b>                                |  |  |
| Name and Mailing Address: (1) Add or Change Mailing Address:   |  |  |                            |   | <del></del>                             |  |  |
| G & S ENTER  |  | ,  | ,                          |   | 12                                      |  |  |
| 9351 S GOZZ  | ER RD  |  |                            |   | <br>ა                                   |  |  |
| HARRISON, I  | D 83833  |  |                            |   | و                                       |  |  |
|  |  |  |                            |   | AM                                      |  |  |
| Pagistared A   | ment (DA) and Begintered Of                        | Files (PO) Address (2  | Change BA and/or F         | 20 Address:                                   |   |  |  |
| STEVE GEYE   | gent (RA) and Registered Of                        | mice (RO) Address: (2  | l) Change RA and/or F      | O Address.                                    | Rece                                    |  |  |
| 9351 S GOZZ  |  |  |                            |   | C)                                      |  |  |
| HARRISON, ID 83833   |  |  |                            |   | Ĕ.                                      |  |  |
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|  | At a transfer of Phone Suntaneous                  | d 050 dd   | 13-6-1-3-3-1-1-1-1         |   | <u> </u>                                |  |  |
| (3) New Regi   | Note: ۱ne Registere<br>stered Agent (RA) Signature | d Office address must be a physical :                                    | idano address (no p        | ostal dox).                                   | ρý                                      |  |  |
|  |  | nd addresses of Managers OR Men<br>ot affect the entity mailing address. |                            |   |   |  |  |
| Manager/Membe  | Name   | Business Address   |                            | City, State, Zip                              |   |  |  |
| Mgr Mem  | STEVE GEVEN  | 935/5, 60z   | ZER Rd                     | HARRISON, ID                                  | 83331                                   |  |  |
| Mgr Mem  | <u> </u>   |  |                            | •   | a                                       |  |  |
| Mgr Mem  |  |  |                            |   |   |  |  |
| Mgr Mem  |  |  |                            |   | arry                                    |  |  |
| Mgr Mem  |  |  | ····                       |   |   |  |  |
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| Mgr Mem  |  |  |                            |   | 70                                      |  |  |
|  | 01   | •  |                            |   | ct                                      |  |  |
| (5) Signature:   | Cola Mero  | (6   | ) Date: 12 -2/             | -2018   | <u>p</u>                                |  |  |
| (7) Type/Print Na  | me: STEVE CEVE                                     | e (8   | Title: Sol = 7             | -2018<br>PROPRIETOR                           | D                                       |  |  |
| Instructions: L  | <del></del>  | lose a check made payable to the Ida                                     |                            |   |   |  |  |
|  | is form and return to the address pro-             |  |                            |   | ٤                                       |  |  |
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|  |  |  |                            |   | Denney                                  |  |  |
|  |  |  |                            |   | ζ.                                      |  |  |