



Idaho Limited Liability Company Annual Report Form

File online at: SOSBIZ.idaho.gov

| 3,6 | Due on/Before: 11/30/20 | Reporting Year: | 2018 | Attn: Annual Reports |
|--|---|--------------------------------------|------------|--|
| Annual Report: No filing fee if received by due date. If reinstatement is required, the reinstatement fee is \$30.00. | | | | 700 West Jefferson, E205 450 North 4th Street Boise, ID 83702 Phone: (208) 334-2300 |
| SOS Contro | ol Number: 577781 | Filing Status: Active-Exis | sting | |
| Limited Liability Company (D) Date | | Date Formed: 11/02/201 | 17 | Formation Locale: ID |
| DELANO C | Mailing Address: APITAL LLC ERASON CRT 83616 | | (1) Add | d or Change Mailing Address: |
| WENDELL | ERASON CRT | ed Office (RO) Address: | (2) Ch | ange RA and/or RO Address: |
| | Note: The Regi | istered Office address must be a phy | sical Idah | io address (no postal box). |
| (3) New Reg | gistered Agent (RA) Signa | ture: | | |
| | | | | rs. Do NOT put 'same as last year' or 'same as abov more space is needed, please add an attachment. |
| Manager/Memi | ber Name | Business Addre | SS | City, State, Zip |
| Mar Me | em 1. /0.1 /0.1 | 10784 | 71 | · C. F & 1. TA GOLIL |

Secretary Mgr **⊠**Mem ∏Mgr ∏Mem Mgr Mem Mgr Mem о Н Mgr Mem Mgr Mem State Mgr Mem (6) Date: (5) Signature:

(7) Type/Print Name:

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Received

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Denney

Return completed form within 30 days to:

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.