



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 10/31/2019

port Form Return completed form within 30 days to a ldaho Secretary of State

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

Annua	l Report: No filing fee if		Boise, ID 83720 Phone: (208) 334-2300		
		Filing Status: Active-Exi Date Formed: 10/05/200	_	Formation Locale: ID	
Name and Ma IDAHO BEEF I STE 122 504 MAIN ST LEWISTON, ID	LLC		(1) Add or Change M	ailing Address:	3:07 PM
PATRICK RICI 504 MAIN ST S LEWISTON, ID	STE 122 0 83501 Note: The Regis	stered Office address must be a phy	(2) Change RA and/o		Received by
(4) Limited Liabil	itered Agent (RA) Signat lity Companies: Enter name accepted. Changes here w		R Members. Do NOT p	ent must sign here to accept the appoint 'same as last year' or 'same is needed, please add an attac	e as abov <mark>∰</mark> .
Manager/Member	Name	Business Addre	SS	City, State, Zip	
Mgr Mem	Patrick Richards	504 Main st	. suite 122	Lewiston, Id. 8	Sary of State Lawerence
(5) Signature:	Pat Richay	lan	(6) Date: 10 -	6-19	——————————————————————————————————————
(7) Type/Print Nam	ne: Pat Richard	son	(8) Title: Minag.	ag Momber	
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Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.