



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 10/31/2020

Dort Form

Return completed form within 30 days to:
N
Idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports

Annual Report: No filing fee if received by the due date.			Boise, ID 837	450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	
		Filing Status: Active-Existing Date Formed: 10/28/2008	Formation Lo	ocale: ID	
Name and Mail J S B INVESTM 8369 W BLOOM BOISE, ID 837	ling Address: MENTS LLC MFIELD DR		1) Add or Change Mailing		MY CI:II
JIM BALL 8369 W BLOOM BOISE, ID 837	MFIELD DR 04	gistered Office address must be a physical		tal box).	Kecelved by
These will not be	accepted. Changes here	nes and addresses of Managers OR Me	mbers. Do NOT put 's s. If more space is nee	ded, please add a	r 'same as above' n attachment.
Manager/Member	Name Jun Ball	Business Address		City, State, Zip	83704
Mgr Mem Mgr Mem	4.5	SRMAN 11441 W Pun	In olz	Boise Id	83709
Mgr Mem	1 -				<u>t</u>
(5) Signature:	(/i Bal	\mathscr{U} (6)	6) Date: // 5 -	20	
(7) Type/Print Nam	e: Jim Bi	A //	6) Date: //-5- 8) Title: MANA	GER	
Instructions: Lea	ibly complete the form above	e. Sign and date this form and return to the a	ddress provided above.		0