



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 02/28/2020

Dort Form

Return completed form within 30 days to A Idaho Secretary of State

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

L	Jue no later than. U2/20		Attn: Annual Reports 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300		
Annual	Report: No filing fee	•			
SOS Control Number: 451048		Filing Status: Active-Exist			ting
Limited Liability Company (D)		Date Formed: 02/23/2015	Formation	Locale: ID	0 2 0
Name and Mailing Address:			(1) Add or Change Mailing Address:		ω
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BRENDA Y ESC 20255 APRICO	QUIVEL T LN	red Office (RO) Address:	(2) Change RA and/or R	O Address:	Received
CALDWELL, ID	83607				/ed
	Note: The Re	gistered Office address must be a physi	ical Idaho address (no po	ostal box).	Λq
(3) New Regist	ered Agent (RA) Sign	ature: If a new agent is appointed in its	ern (2) above, the new agent	must sign here to accept the a	appointment U
These will not be	accepted. Unanges nere	nes and addresses of Managers OR I e will not affect the entity mailing addre	Members. Do NOT put ess. If more space is no	'same as last year' or 'sa eeded, please add an att	achment. Q
Manager/Member	Name	Business Addres	s	City, State, Zip	- 0
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(5) Signature:	Sunda Esqu	unel.	(6) Date: M 0 H	ah 23 20	awerence
(7) To the (12 minut 1) and	0 1 0	2	Member	0 + '0" +	<u> </u>
(7) Type/Print Name	Drenca ?	esquive	(8) Title: +he.	Roal ()	
Instructions: Legi	ibly complete the form above	e. Sign and date this form and return to th			િટ્સ Denney