

Idaho Limited Liability Company Annual Report Form



		ho Limited Liability (online at: sosbiz.idaho.gov	Company Annual Report Form
	Return completed form within Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	30 days to:	For Office Use Only -FILED- File #: 0005862927 Date Filed: 8/15/2024 10:31:00 AM
Annual	Report: No filing fee if receive	ed by the due date.	Due no later than: 09/30/2024
SOS Control Nu Limited Liability C		ling Status: Active-Existing ate Formed: 09/25/2015	Formation Locale: ID
Name and Maili ISENBERGER F PO BOX 2150 OSBURN, ID 83	AMILY LEGACY, LLC		odd or Change Mailing Address:
MARYANN ISEN 1017 E GARDEN OSBURN, ID 83	N AVE 8849	fice address must be a physical Ida	change RA and/or RO Address: aho address (no postal box). above, the new agent must sign here to accept the appointment
		ddresses of Managers OR Memb	ers. Do NOT put 'same as last year' or 'same as above f more space is needed, please add an attachment.
Manager/Member	Name	Business Address	City, State, Zip
Mgr	maryfian Isenberger	1, P.D. Boj 2150	Osburn SA 83849-215D
— · —	aru Inn Doenber	R D E (6) D	Date: 8-12-2024
(7) Type/Print Name	MARYANN ISEN	BERGER (8)T	itle: Manager

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

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