



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 01/31/2020

Return completed form within 30 days to

Idaho Secretary of State

Attn: Annual Reports

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

Annual Report: No filing fee if received by the due date.

SOS Control Number: 405830

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 01/06/2014

Formation Locale: ID

Name and Mailing Address:

POAS MANAGEMENT, LLC

207 W SHERIDAN AVE

NAMPA, ID 83686

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:

RONALD GALLOWAY

207 W SHERIDAN AVE

NAMPA, ID 83686 (CANYON COUNTY)

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	RONALD GALLOWAY	207 W SHERIDAN AVE	NAMPA ID 83686
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	LINDY GALLOWAY	207 W SHERIDAN AVE	NAMPA ID 83686
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

Ronald Galloway

(6) Date:

14-JAN-2020

(7) Type/Print Name:

RONALD GALLOWAY

(8) Title:

Mgr

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

B0421-8499 01/23/2020 1:54 PM Received by ID Secretary of State Lawrence Denney