

Idaho Limited Liability Partnership Annual Report Form

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Return completed form within 30 days to: Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

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Boise, ID 83720			File #: 0005116481	2,
			Date Filed: 2/14/2023 10:42:00 AM Due no later than: 03/31/20	23 1
SOS Control Number: 3204	Filing Status: Active-Ex	isting		
Limited Liability Partnership (D)	Date Formed: 03/24/199	99 Format	ion Locale: ID	23
Name and Mailing Address: ELITE RIFLE WORKS LLP 6045 DEER FLAT RD NAMPA, ID 83686-9449		(1) Add or Change	Mailing Address:	10:42
Registered Agent (RA) and R JIM COMBE 6045 DEER FLAT RD NAMPA, ID 83686	Registered Office (RO) Address:	(2) Change RA and	/or RO Address:	AM Received
(3) New Registered Agent (R. (4) Limited Liability Partnerships:	A) Signature: If a new agent is appointed in Enter names and addresses of 2 or more P ges here will not affect the entity mailing ad-	n item (2) above, the new a	agent must sign here to accept the appointm	/e'. Hi
Name	Business Address		City, State, Zip	
Jim Combe	6045 Dear Flat K	24.	lampa Id 83686	o
(5) Signature:	3275 E. Whitman S		8/23	f the Idaho Secre
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Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.