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	ldaho Limited Li	ability Com	panv Annual	Report Form	n	ü
	File online at: SOSBIZ.	Return completed form within 30 c		N thin 30 day∰to		
	Due on/Before: 09/30/20)18 Re	porting Year: 2018	Idaho Secret Attn: Annual	-	2
Annual Repo	ort: No filing fee if recei	ved by due date.		450 North 4tl	n Street	1
If reinstateme	ent is required, the reinsta	atement fee is \$30	0.00.	Boise, ID 83 Phone: (208)		3
SOS Control N	lumber: 475763	Filing Statu	s: Inactive-Dissolv (Administrative)	red		Entity (\$30 fee)
Limited Liability	Company (D)	Date Form	ed: 09/24/2015	Formation I	_ocale: ID	19
Name and Mailing Address: (1) Add or Change Mailing Address:						
MJW TACKLE LLC						
PO BOX 590						2
FRUITLAND, I	D 83619					<u> </u>
	- alternate teach in committee committee () is not in a comparable consideration ().	nessangen (semilika iki kapangana) kapana (sa	a to the section of	and the second s		AM
Registered Agent (RA) and Registered Office (RO) Address: KENDRA FREITAG 1119 NW 19TH ST FRUITLAND, ID 83619 (2) Change RA and/or RO Address: Kendra Freitag 1135 Nw 19th St. Fruitland ED. 83619						
(3) New Pegis	Note: The Regi tered Agent (RA) Signa		s must be a physical lo			ved by
		· · · · · · · · · · · · · · · · · · ·				. н
(4) Limited Liabili These will not be	ity Companies: Enter name accepted. Changes here was accepted.	es and addresses of will not affect the en	i Managers OR Memb tity mailing address.	pers. Do NOT put 's If more space is nee	ame as last year c eded, please add a	or 'same as a p gve ≀n attachment.
Manager/Member	Name		siness Address	· · · · · · · · · · · · · · · · · · ·	City, State, Zip	76
Mgr Mem Mgr Mem Mgr Mem	Kendra Frei	16-9 113	35 NW 19H	\$4.	Fruitland	
Mgr Mem						<u> </u>
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Mgr Mem	er process which	r	, was to be seen to the see			— <u>О</u> Н
Mgr Mem						<u> </u>
(5) Signature:	Endio Fre	tog	(6)	Date: 1-18-19	Ì	# 9
(7) Type/Print Nam	e: Kendra Fr	Eitaa	(8)	Title: Mana	ger / Ou	O O

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.

Lawerence Denney