





## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney ANNUAL REPORT

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-FILED-

File #: 0004344528

Date Filed: 7/12/2021 8:34:18 AM

| Entity Name and Mailing Address:  |                                     |              | B 1 B 110                 |            |  |
|---|-------------------------------------|--------------|---------------------------|------------|--|
| Entity Name:  |                                     |              | Peace Love Paws LLC       |            |  |
| The file number of this entity on the records of the Idaho Secretary of State is: |                                     |              | 0003585899                |            |  |
| Address   |                                     |              | VAN ENGELEN & EDGAR CF    | A & CO     |  |
|   |                                     |              | PO BOX 5377               |            |  |
|   |                                     |              | TWIN FALLS, ID 83303-5377 |            |  |
| Entity Details:   |                                     |              |                           |            |  |
| Entity Status   |                                     |              | Active-Existing           |            |  |
| This entity is organized unde   | r the laws of:                      | IDAHO        |                           |            |  |
| If applicable, the old file num<br>Idaho Secretary of State was                   | ber of this entity on the rec       | cords of the |                           |            |  |
| The registered agent on record is:  |                                     |              |                           |            |  |
| Registered Agent  |                                     |              | GREGORY EDGAR             |            |  |
|   |                                     |              | Registered Agent          |            |  |
|   |                                     |              | Physical Address          |            |  |
|   |                                     |              | 1411 FALLS AVE E          |            |  |
|   |                                     |              | TWIN FALLS, ID 83301      |            |  |
|   |                                     |              | Mailing Address           |            |  |
| Agent or Address Change   |                                     |              |                           |            |  |
| Select if you are appoint   | ing a new agent.                    |              |                           |            |  |
|   |                                     |              |                           |            |  |
| Limited Liability Company Managers a  | nd Members                          |              |                           |            |  |
| Name  | Title                               |              | Business A                | ddress     |  |
| Pamela Holt   | Member                              |              | RESTVIEW DRIVE            |            |  |
|   |                                     | TWIN         | FALLS, ID 83301           |            |  |
|   |                                     |              |                           |            |  |
| The annual report must be signed by a   | in authorized signer of the entity. |              |                           |            |  |
| Job Title: Member   |                                     |              |                           |            |  |
|   |                                     |              |                           |            |  |
| Pamela Holt   |                                     |              |                           | 07/12/2021 |  |
| Sign Here   |                                     |              |                           | Date       |  |