



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 11/30/2021

Dort Form Return completed form within 30 days to:

Idaho Secretary of State Attn: Annual Reports

Annua	l Report: No filing fee if	received by the due date.	450 North 4 Boise, ID 83 Phone: (208	3720	0/25/
SOS Control Number: 481697		Filing Status: Active-Existing	Filing Status: Active-Existing		2 02
Limited Liability Company (D)		Date Formed: 11/16/2015	Date Formed: 11/16/2015 Formation Locale: ID		ŭ
Name and Mailing Address: GRACEFULGRIT COACHING, LLC 8562 S GOZZER RD HARRISON, ID 83833-9414		· ·	(1) Add or Change Mailir	ng Address:	10:00 AM
Registered Ag JULIA R GREE 8562 S GOZZE HARRISON. ID	R RD	Office (RO) Address:	(2) Change RA and/or Ro	O Address:	1 Receive
(4) Limited Liabili	tered Agent (RA) Signatu	are: If a new agent is appointed in item and addresses of Managers OR Me Il not affect the entity mailing addres	(2) above, the new agent or the moders. Do NOT put 's	must sign here to accept the a	me as ab ove'
Manager/Member	Name	Business Address		City, State, Zip	H
Mgr Mem	Julia R. Gra	8562 S. Ge	SZZET Road	Harrison, Idah	o for state La
(5) Signature:	Julia R. X Tulia R.	Green !	6) Date: 10-21	-21	€ 0 5
(7) Type/Print Name	V Julia R.	Green (8) Title Register	ed Agent //	Manage

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