



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

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

For Office Use Only

-FILED-

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

SOS Control Number: 3915247

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 06/24/2020

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

N4, LLC
1950 BENCH RD
MONTPELIER, ID 83254-5223

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

(2) Change RA and/or RO Address:

CHARLES LEE NELSON
1950 BENCH RD
MONTPELIER, ID 83254

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	C. Lee Nelson	1950 Bench Rd	Montpelier, Idaho 83254
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Nina Nelson	1950 Bench Rd	Montpelier, Id 83254
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Jimmy K Nelson	1300 Wilson	Warland, Wyo 83401
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Gay Carl Nelson	P O Box 143	Coleville, Wyo 83111
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Berna Louise Chacon	4075 Sunnybrook Dr	Prattville, Id 83202
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Linnna May Nelson	1415 Bench Rd	Prattville, Id 83201
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Joseph Lee Nelson	18608 V's Hwy 30	Montpelier, Id 83254
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem	David Wayne Nelson	2233 Butler ST	Prattville, Id 83201
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: C. Lee Nelson

(6) Date: 6/24/24

(7) Type/Print Name: C Lee Ne/8017

(8) Title: Manager

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

B0914-2857-06/27/2024 12:39 PM Received by Office of Idaho Secretary of State