

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

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Aillida	I Report: No filing fee if rec	eived by the due date.		Due no later that	n: 01/31/2023 \ -
SOS Control Number: 4583369 Limited Liability Company (D) Name and Mailing Address: KJ Sooner, LLC		Filing Status: Active-Existing Date Formed: 01/27/2022 Formation Locale: ID		<u> </u>	
		(1) Add or Change Mailing Address:			F-
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268 IRON HOF					· · ·
CHALLIS, ID 8	33220-4900				į
					2
Registered Ag	ent (RA) and Registered Of	fice (RO) Address:	(2) Change RA and/or	RO Address:	 -
Keith D. Lewis		,			Ċ
206 IRON HORSE LANE		1			
CHALLIS, ID 83226					d
					t
	Note: The Registered	d Office address must be a physic	caľ Idaho address (no _l	oostal box).	(
(3) New Regis	tered Agent (RA) Signature				,
(o) itom itogio	torou Agont (IVA) oighataro	If a new agent & appointed in ite	m (2) above, the new agei	nt must sign here to accep	t the appointment.
(4) Limited Liabil	ity Companies: Enter names an	d addresses of Managers OR M	lembers. Do NOT pu	t 'same as last vear' o	ا ا same as abo
	accepted. Changes here will no				
Manager/Member	Name	Business Address		City, State, Zip	
Mgr ☐ Mem	Kollin J. Lewi		airie Road	Glencoe O	K 74032
Mgr Mem	Keith D. Lewis			Challis I	D 83226
Mgr Mem Mgr Mem	Juanna Beth Lew	is 268 Iron t	lorse Lane	Challi's Il	83226
Mgr Mem					
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1	ath. A faculie				()
(5) Signature:	ath he herewas	•	(6) Date: Fe boo	voni (-	2023
(7) Type/Print Nam	W NI DI	>w/ES	(8) Title: Miconey	0.00	2023
(, , Type, I line Hall)			(o) Title. [*[CONC	45	
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Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

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