		Idaho Limited Liab File online at: sosbiz.idah		y Annual Report Form
CREAT CONTRACTOR	Return completed form Idaho Secretary of State	n within 30 days to:		For Office Use Only
	Attn: Annual Reports			-FILED-
OF THE	450 North 4th Street Boise, ID 83720			File #: 0005412318
	Phone: (208) 334-2300			Date Filed: 9/27/2023 9:01:00 AM
Annual Report: No filing fee if received by the due date. Due no later than: 08/31/2023				
SOS Control Number: 3595125 Filing Status: Active-Existing				
Limited Liability	Company (D)	Date Formed: 08/14/2019	9 Formatio	on Locale: ID
Name and Mailing Address: (1) Add or Change Mailing Address: MY 3 LAPREILS LLC ANDREW CARPENTER APT-1 3985E 796 WHITTIER ST IDAHO FALLS, ID 33401-2784 R: 064 Julto 834442 Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address: Andrew Carpenter 3985E. 146 N. 796 WHITTIER ST-1 3985E. 146 N. IDAHO FALLS, ID 33401-2784 8985E. 146 N. IDAHO FALLS, ID 33401 3985E. 146 N. IDAHO FALLS, ID 83401 3985E. 146 N. IDAHO FALLS, ID 83401 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 abo				
Manager/Member	Name	Business Addres	is 7416 No	City, State, Zip
Mgr Mem			<u> </u>	
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(6) Date:

(8) Title Over

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

D Carpenter

INV D. Co, Da

rew

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Mgr Mem

Mgr Mem

Mgr Mem

(5) Signature:

(7) Type/Print Name: