



## **Idaho Limited Liability Company Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 02/28/2022

port Form

Return completed form within 30 days to: 149
Idaho Secretary of State

Idaho Secretary of Stat Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Annual	Report: No filing fee i	1	Boise, ID 83720 Phone: (208) 334-2300	
		Filing Status: Active-Existin Date Formed: 02/07/2021	_	
Name and Mail Noleen Constru AARON NOLEE 2984 N BRYSO BOISE, ID 837	ction LLC EN N AVE		(1) Add or Change Mailing Ad	ddress:
Registered Age Sheri "Sharki" K 2315 W IRENE BOISE, ID 837	Contra STREET	ed Office (RO) Address:	(2) Change RA and/or RO Ac	idress:
(4) Limited Liabilit	ered Agent (RA) Signa		(2) above, the new agent must	sign here to accept the appointment.
Manager/Member Name		Business Address		ity, State, Zip
Mgr Mem	Aaron No!			Suise, ID 93113
(5) Signature: (7) Type/Print Name	hus Men. A aron N.		6) Date: 1/4/22 8) Title: Managl	

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