



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

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

Due no later than: 12/31/2019 Annual Report: No filing fee if received by the due date.				Attn: Annual Reports 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300		
Limited Liability Company (D)		Date Formed: 12/2	21/2016	Formation Locale: ID		
Name and Mail PINE STREET I PO BOX 174 PRINCETON, IE	HILL, LLC	· ·	(1) Add	or Change Mailing	Address:	(
Registered Age GREGORY V E 1136 BEAR CR PRINCETON, II	VANS EEK RD	ed Office (RO) Address:	(2) Char	nge RA and/or RO	Address:	
	ered Agent (RA) Signa	If a new agent is app	ointed in item (2) abov	ve. the new agent m	oust sign here to accept th	
		es and addresses of Manag will not affect the entity mai				
	Name	Business		1/00130	City, State, Zip	
Mgr Mem (5) Signature (7) Type/Print Name	Evano Trustae,	Vincent Evans	Trust (6) Date			
Instructions: Legi	ibly complete the form above	Sign and date this form and r	eturn to the address	provided above.	,	

The Correct and technical way to write out would be Gregory Evans Trustee, Vincent Evans Trust
The Trust is the member the LLC is Member Managed so The Member is correct