



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 08/31/2021

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Noort Form
Return completed form within 30 days to:
Idaho Secretary of State
Attn: Annual Reports

Attn: Annual Reports 450 North 4th Street

Annua	I Report: No filing fee	· ·	Phone: (208) 334-2300		
		Filing Status: Active-Existing Date Formed: 08/26/1996		Formation Locale: ID	
Name and Mai C & B REECE, BONNIE REEC PO BOX 2 TETONIA, ID 8	LLC SE	(1	I) Add or Change Mailin	and Address:	1 9:30 AM
	ent (RA) and Register	ed Office (RO) Address: (2	2) Change RA and/or RO) Address:	M Received
	tered Agent (RA) Sign	ature: If a new agent is appointed in item ((2) above, the new agent r	nust sign here to accept the app	
These will not be	accepted. Changes here	will not affect the entity mailing address		eded, please add an attac	
Manager/Member Mgr / Mem Mgr / Mem	4 4774	Business Address Vimpenny 105 iJee LCE LO2 N. re Al 8990	Main	City, State, Zip Saratoga, W Tefonia, Su Victor, Su	823 8345 8345 8345 8345 8345 8445 8445 844
(5) Signature: (7) Type/Print Nam	Sonnie Bonnie	15	i) Date: 8-16-	zi ber	Laweren de
Instructions: Leg	ibly complete the form above	. Sign and date this form and return to the ad	ddress provided above.		-