



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

File online at: SOSBIZ.idaho.gov

Due no later than: 02/28/2019

Reporting Year: 2018

Return completed form within 30 days to:

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

Annual Report: No filing fee if received by the due date.			Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 154644	Filing Status: Active-Existi	Status: Active-Existing		
Limited Liability Company (D)	Date Formed: 02/16/2006	Formatio	on Locale: ID	
Name and Mailing Address: SILVERWINGS L.L.C. PO BOX 581 CASCADE, ID 83611		(1) Add or Change M	ailing Address:	
Registered Agent (RA) and Registered Offic THOMAS K BACON 89 PANORAMA DRIVE CASCADE, ID 83611	e (RO) Address:	(2) Change RA and/o	or RO Address:	
Note: The Registered O  (3) New Registered Agent (RA) Signature:  (4) Limited Liability Companies: Enter names and a These will not be accepted. Changes here will not a	ddresses of Managers OR M	Same (2) above, the new ag embers. Do NOT p	ent must sign here to accept the appointment.  out 'same as last year' or 'same as above'	
Manager/Member Name	Business Address		City, State, Zip	
Mgr Mem	KON 85 PAN	orana Da	(Asort 70 8361)	
(5) Signature:		(6) Date: 4/	12/2019	
(7) Type/Print Name: Thems	RACOL	(8) Title: MA	vien _	

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