



Idaho Limited Liability Company Annual Report Form

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Due no later than: 07/31/2021

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Return completed form within	n 30 days <mark>00</mark> o:
Idaho Secretary of State	2

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

Annua	Report: No filing fe		Boise, ID 83720 Phone: (208) 334-2300			
SOS Control Number: 513015			Filing Status: Active-Existing			202
Limited Liability Company (D)			Formed: 07/15/2016	Formation Locale: ID		<u> </u>
Name and Mai MOUNTAIN RI PO BOX 128 INKOM, ID 832	VER SALERS RANC	H, LLC		ng Address:	3:27 PM	
Registered Ag W DAVID PHIL 547 E LOWER INKOM, ID 832	CREEK RD	ered Office (R	O) Address:	(2) Change RA and/or R	O Address:	Received
(3) New Regist	Note: The R	nature:	address must be a physic			e appointment
(4) Limited Liabili These will not be	ty Companies: Enter na accepted. Changes he	ames and addresere will not affect	sses of Managers OR M the entity mailing addre	embers. Do NOT put ' ss. If more space is ne	same as last year' or '	same as affove
Manager/Member	Name		Business Address	. 0 01	City, State, Zip	<u> </u>
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(5) Signature:		Born		(6) Date: 8-9	-21	awere
(7) Type/Print Nam	e: DAVID	Phillip	5	(8) Title: Resid	ent/mg	√ n
Instructions: Lea	ibly complete the form abo	ve. Sign and date	this form and return to the	address provided above		,