







## STATE OF IDAHO

Office of the secretary of state, Phil McGrane **ANNUAL REPORT** 

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$0.00

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-FILED-

File #: 0005757548

Date Filed: 6/3/2024 3:03:54 PM

| Entity Name and Mailing Address:  |                      |              |   |           |
|---|----------------------|--------------|---|-----------|
| Entity Name:  |                      |              | Reeve Industries LLC  |           |
| The file number of this entity on the records of the Idaho Secretary of State is: |                      |              | 0005273666  |           |
| Address   |                      |              | 784 S. CLEARWATER LOOP STE R<br>POST FALLS, ID 83854                |           |
| Entity Details:   |                      |              |   |           |
| Entity Status   |                      |              | Active-Existing   |           |
| This entity is organized under the laws of:                                       |                      |              | IDAHO   |           |
| If applicable, the old file number o the Idaho Secretary of State was:            | f this entity on th  | e records of |   |           |
| The registered agent on record is:  |                      |              |   |           |
| Registered Agent  |                      |              | ALL DAY \$49 IDAHO REGISTERED AGENT LLC Commercial Registered Agent |           |
|   |                      |              | Physical Address  |           |
|   |                      |              | 784 S CLEARWATER LOOP ST POST FALLS, ID 83854                       | EF        |
|   |                      |              | Mailing Address   |           |
|   |                      |              | 784 S CLEARWATER LOOP ST<br>POST FALLS, ID 83854                    | ΈF        |
| Agent or Address Change   |                      |              |   |           |
| Select if you are appointing a  | new agent.           |              |   |           |
| Limited Liability Company Managers and Me   | mbers                |              |   |           |
| Name  | Title                |              | Business Address  |           |
| ■ Noah S Reeve  | Member               |              | CLEARWATER LOOP STE R<br>ALLS, ID 83854                             |           |
| Taylor F Gray   |                      |              | MSON LANE<br>I, ID 83835  |           |
| The annual report must be signed by an auth                                       | orized signer of the | entity.      |   |           |
| Job Title: authorized signer  | Ü                    | ·            |   |           |
| Robin Jones   |                      |              | 0   | 6/03/2024 |
| Sign Here   |                      |              | Di  | ate       |