



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 12/31/2020

Return completed form within 30 days to:

Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise, ID 83720
Phone: (208) 334-2300

Annual Report: No filing fee if received by the due date.

SOS Control Number: 3375302
Limited Liability Company (D)

Filing Status: Active-Existing
Date Formed: 12/19/2018

Formation Locale: ID

Name and Mailing Address:

3N Snow Creek Ranch L.L.C.
1250 N 3100 E
ASHTON, ID 83420-5011

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:

SHARON CATO
1264 N 3100 E
ASHTON, ID 83420

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Sharon Cato	1264 N. 3100 E.	Ashton, Idaho 83420
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Ruth Ann Nedrow	P.O. Box 31862	Aurora, Colorado 8004
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Nedrow Sisters Trust u/t/a		
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem	Sharon Cato, as trustee	1264 N. 3100 E.	Ashton, Idaho 83420
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Sharon Cato	1264 N. 3100 E.	Ashton, Idaho 83420
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: *Sharon Cato*

(6) Date: *December 1, 2020*

(7) Type/Print Name: *Sharon Cato*

(8) Title: *Manager*

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

B0549-4195 12/07/2020 10:06 AM Received by ID Secretary of State Lawrence Denney