



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

File online at: sos.idaho.gov

Due no later than: 07/31/2019

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Return completed form within 30 days	to:

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

Annua	al Report: No filing fee if re	Boise, ID 83 Phone: (208		, ,	
SOS Control N	lumber: 618310	Filing Status: Active-Existin	ng		r.j.
Limited Liability	Company (D)	Date Formed: 07/11/2018	Formation I	Locale: ID	, de la composition della comp
Name and Ma	iling Address:		(1) Add or Change Mailir	g Address:	N
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	AN LEGION BLVD				familie Jamelie
MOUNTAINH	OME, ID 83647				5-20.
DEIDRA PRIES	jent (RA) and Registered C ST AN LEGION BLVD	office (RO) Address:	(2) Change RA and/or R	O Address:	Re Ce L
MOUNTAIN H	OME, ID 83647				;
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	Note: The Register	ed Office address must be a physica	al idaho address (no po	stal box).	izoget B <sub>io</sub> l Pul <sup>ost</sup>
(3) New Regis	tered Agent (RA) Signature	<u> </u>			\
		If a new agent is appointed in item	(2) above, the new agent	must sign here to accept the app	
(4) Limited Liabili These will not be	ity Companies: Enter names ar accepted. Changes here will n	nd addresses of Managers OR Me not affect the entity mailing address	mbers. Do NOT put 's s. If more space is ne	same as last year' or 'same eded, please add an attach	as above nment.
Manager/Member	Name	Business Address		City, State, Zip	O (1)
Mgr Mem	Deidra Priest	1350 Amprica	in legion Blud	Mountain Home	8364
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(5) Signature:	soldia Lie		(6) Date: ( ) ( ) ( )	XU-11 2019	0
(7) Type/Print Nam	e: Deidra Prie:	57	(8) Title: MR.		
Instructions: Los	gibly complete the form shows. En-	close a chack made equable to the l	daha Saaratani of State	for \$20.00	Zoon

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30.00 Sign and date this form and return to the address provided above.