



Idaho Limited Liability Company Annual Report Form

For Office Use Only

File online at: sosbiz.idaho.gov

Due no later than: 04/30/2022

Return completed **-FILED-** 30 days to:

Idaho Secretary of State

Attn: Ann File #: 0004674085

450 North Date Filed: 3/25/2022 1:11:00 PM

Boise, ID 83720

Phone: (208) 334-2300

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

SOS Control Number: 315441

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 04/04/2011

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

PACK 10, LLC

6993 OAK ST

BONNERS FERRY, ID 83805-8578

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

(2) Change RA and/or RO Address:

ALBERT J WOLFF

6993 OAK ST

BONNERS FERRY, ID 83805-8578

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 checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Albert J. Wolff	6993 Oak St	Bonnerr Ferry, ID 83805
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Sandra K. Wolff	6993 Oak St	" " 8578
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

Sandra K Wolff

(6) Date:

March 21, 2022

(7) Type/Print Name:

Sandra K Wolff

(8) Title:

Manager

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

6685-2773 03/25/2022 1:11 PM Received by ID SOS State Revenue Bureau