



(5) Signature:

(7) Type/Print Name:

Idaho Limited Liability Partnership Annual Report Form

File online at: sos.idaho.gov

Due no later than: 06/30/2019

Return	completed	form	within	30	day
Idaho S	Secretary of S	tate			G

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Annual Report: No filing fee	Boise, ID 83720 Phone: (208) 334-2300	/30/	
SOS Control Number: 15464 Limited Liability Partnership (D)	Filing Status: Active-Existing Date Formed: 06/20/2013	Formation Locale: ID	
Name and Mailing Address:	Add or Change Mailing Address:	<u> </u>	
J & D AVIATION LLP		DORNI WOD	
412 PIETRA WAY CALDWELL, ID 83605		POBOX 602 Cardwell, Idaho	3260\$
Registered Agent (RA) and Registe JESSE DEE CLINE	red Office (RO) Address: (2) (Change RA and/or RO Address:	6 6 5
27915 UPPER PLEASANT RIDGE RI	n		@ ⊢.
WILDER, ID 83676			ive
			<u>σ</u>
Note: The Re	egistered Office address must be a physical Id	aho address (no nostal hox)	γq
(3) New Registered Agent (RA) Sign	nature: (Lose)	above, the new agent must sign here to accept to	H_
	ames and addresses of 2 or more Partners. e will not affect the entity mailing address. I		
Name	Business Address	City, State, Zip	7
on & seemy	305 W. BIVE	New Plymond T	
Day Easterday	412 Pietra Way	Carbinell, Da	83696
,			О
			
			<u> </u>

(6) Date:

(8) Title:

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

Lawerence Denney

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