



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Dort Form

Return completed form within 30 days to:

Idaho Secretary of State

| Due no later than: 11/30/2020 | | | | | Attn: Annual Reports 450 North 4th Street | |
|--|--|-----------------------------------|------------------------------------|--|--|----------------------------|
| Annual | Report: No filing fee if | received by | · · | Boise, ID 83720 Phone: (208) 334-2300 | | |
| SOS Control N | umber: 481697 | Filing St | tatus: Active-Exis | ting | | 0/29/202 |
| Limited Liability | Company (D) | Date Fo | Date Formed: 11/16/2015 Forma | | ation Locale: ID | |
| Name and Mailing Address: GRACEFULGRIT COACHING, LLC | | | (1) Add or Change Mailing Address: | | | |
| 8562 S GOZZE HARRISON, ID | | | | | | 9 5 |
| TIARRISON, ID | 03033-9414 | | | | | AM |
| Registered Agent (RA) and Registered Office (RO) Address: JULIA R GREEN 8562 S GOZZER RD | | | | | | χ 0 0 |
| HARRISON, ID | | | | | | ive |
| (2) Now Bogiet | - | | iress must be a phys | ical Idaho address (no pos | etal box). | у р |
| | ered Agent (RA) Signat | If a nev | | em (2) above, the new agent n | | |
| (4) Limited Liabilit These will not be | ty Companies: Enter name: accepted. Changes here w | s and addresserill not affect the | es of Managers OR I | Members. Do NOT put 's ess. If more space is nee | ame as last year' or 's eded, please add an a | ame as above'to ttachment. |
| Manager/Member | | | Business Address | | City, State, Zip | 3 |
| Mgr Mem Mgr Mem | Julia R. Gr. | nn | 85625. | GOTTERRA | Harrison | 1, ld.83893 |
| Mgr Mem | | | | | | |
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| Mgr Mem | | | | | | |
| Mgr Mem | | | | | | |
| (5) Signature: | Julia R. St | leer | | (6) Date: 10 - Z | 25-20 | aweren ce |
| (7) Type/Print Name | Julia R. | Green |) | (8) Title: Regis | tered Ag | ent o |
| Instructions: Legi | ibly complete the form above. | Sign and date thi | s form and return to th | ne address provided above. | /mgp | ye De |