



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 04/30/2020

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: 602778

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 04/16/2018

Formation Locale: ID

Name and Mailing Address:

SALON SERENDIPITY LLC

515 LOST BASIN CT

NAMPA, ID 83686-6427

(1) Add or Change Mailing Address:

2718 S. Almond Ct.
Nampa, Id 83686

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

LUCY A BREDE

515 LOST BASIN CT

NAMPA, ID 83686

(2) Change RA and/or RO Address:

2718 S. Almond Ct.
Nampa, Id 83686

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 checked="" type="checkbox"/> Mem	Lucy A. Brede	93 N. Midland Blvd	Nampa Idaho 83651
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

Lucy A Brede

(6) Date:

May 14, 2020

(7) Type/Print Name:

Lucy A. Brede

(8) Title:

Owner/manager

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

B0507-3347 05/18/2020 10:56 AM Received by ID Secretary of State Lawrence Denney