





## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney ANNUAL REPORT

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-FILED-

File #: 0005006421

Date

Date Filed: 12/2/2022 5:43:51 PM

| Entity Name and Mailing Address:                                             |                            |                                         |  |
|------------------------------------------------------------------------------|----------------------------|-----------------------------------------|--|
| Entity Name:                                                                 |                            | OLHF ADA 2, LLC                         |  |
| Foreign Name (name in home jurisdict                                         | tion):                     | OLHF ADA 2, LLC                         |  |
| The file number of this entity on the re Secretary of State is:              | cords of the Idaho         | 0000533571                              |  |
| Address                                                                      |                            | PO BOX 6300<br>SANTA ANA, CA 92706-0300 |  |
| Entity Details:                                                              |                            |                                         |  |
| Entity Status                                                                |                            | Active-Existing                         |  |
| This entity is organized under the laws                                      | s of:                      | CALIFORNIA                              |  |
| If applicable, the old file number of this the Idaho Secretary of State was: | s entity on the records of | W176277                                 |  |
| The registered agent on record is:                                           |                            |                                         |  |
| Registered Agent                                                             |                            | SYNERGY CORPORATE SERVICES, LLC         |  |
|                                                                              |                            | Commercial Registered Agent             |  |
|                                                                              |                            | Physical Address                        |  |
|                                                                              |                            | 1555 W SHORELINE DR<br>STE 100          |  |
|                                                                              |                            | BOISE, ID 83702                         |  |
|                                                                              |                            | Mailing Address                         |  |
|                                                                              |                            | 1555 W SHORELINE DR                     |  |
|                                                                              |                            | STE 100                                 |  |
|                                                                              |                            | BOISE, ID 83702                         |  |
| Agent or Address Change                                                      |                            |                                         |  |
| Select if you are appointing a new                                           | <i>ı</i> agent.            |                                         |  |
| imited Liability Company Managers and Member                                 | rs                         |                                         |  |
| Name                                                                         | Title                      | Business Address                        |  |
| Morgan Roach                                                                 |                            | P.O. BOX 6300<br>SANTA ANA, CA 92706    |  |
| The annual report must be signed by an authorize                             | ed signer of the entity.   |                                         |  |
| Job Title: Manager                                                           |                            |                                         |  |
|                                                                              |                            |                                         |  |

Sign Here