

INSTRUCTIONS ON REVERSE SIDE

No. 886	Idaho Limited Liability Company Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX	
Return To	Due No Later Than November 30, 1995		SCOTT A. LEMEN	
	1. Mailing Address -- Please Correct If Not Correct		5605 SUNSET RD.	
Secretary of State	SUNSET ENTERPRISES, L.L.C.		FRUITLAND ID 83619	
700 W Jefferson	SCOTT A. LEMEN			
P.O. Box 83720	5605 SUNSET RD.		3. Organized Under The Laws of	
Boise, ID 83720-0080	FRUITLAND ID 83619		ID	
* FIRST NOTICE *			NO: 886	
NO FEE REQUIRED				
4. Names and Addresses of ☐ Managers or ☒ Members (check one)			MUST BE PRINTED OR TYPED	
Name	Street or P.O. Address	City	State	Zip
SCOTT A LEMEN	11587 HWY 95	Payerette	ID	83661
NICOLE E LEMEN	5605 SUNSET RD	FRUITLAND	ID	83619
DANIEL K LEMEN				
RUTH L LEMEN				
5. Signature of the Current Registered Agent (if changed in block 2)		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.		
_____		Signature _____ Date 7-26-95 Name (Typed or Printed) SCOTT A LEMEN		