



# Idaho Limited Liability Company Annual Report Form

File online at: [sosbiz.idaho.gov](https://sosbiz.idaho.gov)



## 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

For Office Use Only

**-FILED-**

File #: 0006081075

Date Filed: 1/27/2025 11:11:00 AM

Due no later than: 02/28/2025

**Annual Report: No filing fee if received by the due date.**

SOS Control Number: 5087440

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 02/01/2023

Formation Locale: ID

### Name and Mailing Address:

The Tinker LLC  
1735 CAMARILLO WAY  
TWIN FALLS, ID 83301-9252

(1) Add or Change Mailing Address:

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

ALVA DALE HENKE  
1735 CAMARILLO WAY  
TWIN FALLS, ID 83301

(2) Change RA and/or RO Address:

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 type="checkbox"/> Mem	Alva Dale Henke	1735 Camarillo Way	Twin Falls, Idaho 83301
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

Alva Dale Henke

(6) Date:

January 22, 2025

(7) Type/Print Name:

Alva Dale Henke

(8) Title:

Owner

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

B0959-8952 01/27/2025 11:11 AM Received by Office of the Idaho Secretary of State