

Idaho Limited Liability Company Annual Report Form

File online at: 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

B0990-0582

-FILED-

File #: 0006130936

Date Filed: 2/27/2025 1:10:00 PM

Annual	Report: No filing fee if r		Due no later than: 02/28/2025		
SOS Control Number: 5614284 Limited Liability Company (D)		Filing Status: Active-Existin Date Formed: 02/27/2024	_	Formation Locale: ID	
Name and Mail BEAR LAKE CA AMY D. SILER 4238 FOREST (AMMON, ID 83	ABIN, LLC GLEN DR		(1) Add or Change M	ailing Address:	1:10 FM
Registered Age AMY D. SILER 4238 FOREST 6 AMMON, ID 84	306	Office (RO) Address: ered Office address must be a physica	(2) Change RA and/o		Accetved by
	ered Agent (RA) Signatu	If a new agent is appointed in item		ent must sign here to accept the appointment	Н
(4) Limited Liabilit These will not be	ty Companies: Enter names accepted. Changes here wi	and addresses of Managers OR Me Il not affect the entity mailing addres	embers. Do NOT p s. If more space is	ut 'same as last year' or 'same as abo needed, please add an attachment.	آ ۾'eve
Manager/Member	Name	Business Address		City, State, Zip	7
Mgr Mem Mgr Mem Mgr Mem	AMY D. SILER	4238 FOREST G	BLEN	AMMON, IDAHO 84306	<u>. </u>
Mgr Mem Mgr Mem Mgr Mem					
Mgr Mem Mgr Mem					- Tallion
Mgr Mem					- E-C-I
(5) Signature: Amy D. Siler (6) Date: FEBRUARY 27, 2025					
(7) Type/Print Name	AGER				

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