



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

-FILED-

File #: 0006145874

Date Filed: 3/6/2025 1:37:00 PM

Due no later than: 02/28/2025

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

SOS Control Number: 410717
Limited Liability Company (D)

Filing Status: Active-Existing
Date Formed: 02/18/2014

Formation Locale: ID

Name and Mailing Address:

BP LANDSCAPING LLC.
10544 RAIN SPRINGS ST
NAMPA, ID 83687-5107

(1) Add or Change Mailing Address:

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

BERTHA PALOMINOS
10544 RAINSPRING ST
NAMPA, ID 83687

(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 type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Berta palominos Rico		
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Adan Rico morales		
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem		10544 RAIN SPRINGS ST	83687
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem		ST NAMPA ID	
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem		83687	
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem		10544 RAIN SPRING	
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem		ST NAMPA ID	
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem		83687	83687
<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: Berta palominos Rico

(6) Date: 3/6/25

(7) Type/Print Name: Adan Rico morales

(8) Title: member

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

00990-1316-03/06/2025 1:37 PM Received by Office of the Idaho Secretary of State