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## Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 06/30/2019

Return completed form within 30 days to:
Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise, ID 83720

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Annual Report: No filing fee if received by the due date.			Boise, ID 83720 Phone: (208) 334-2300		20/20
SOS Control No	umber: 264002	Filing Status: Active-Ex	risting		19
Limited Liability Company (D)		Date Formed: 06/15/20	Date Formed: 06/15/2009 Formation Locale: ID		و
Name and Mail K.C.'S CAR CA	_		(1) Add or Chang	e Mailing Address:	39
PO BOX 185 PINEHURST, IC	0 83850				AM
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Registered Agent (RA) and Registered Office (RO) Addition Land CRAWFORD 702 S DIVISION PINEHURST, ID 83850			(2) Change RA a	nd/or RO Address:	ceived
·		gistered Office address must be a pl	nysical Idaho address	(no postal box).	by ID
(3) New Negist	ered Agent (IVA) Sign		in item (2) above, the ne	N agent must sign here to accept the a	appointment. V
(4) Limited Liabilit These will not be	ty Companies: Enter nar accepted. Changes here	nes and addresses of Managers C e will not affect the entity mailing a	R Members. Do NO	PT put 'same as last year' or 'sa ce is needed, please add an atta	acimient. <b>D</b>
Manager/Member	Name	Business Addı	ess	City, State, Zip	
☐ Mgr Mem	CONNIE L. CA	AWFORD B 702 S	, DIVISION	PINEHURST, I	D 83850F
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(5) Signature: See S. Nowford (6) Date: 6/17/2019

(7) Type/Print Name: EXIN L. CRAWFORD (8) Title: Agg, STERES Agent

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