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

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

SOS Control Number: 374123
Limited Liability Company (D)

Filing Status: Active-Existing
Date Formed: 02/12/2013   **Formation Locale:** ID

Name and Mailing Address:
TRIANGLE E PROPERTIES, LLC
1100 ROBIN LN
EMMETT, ID 83617-5107

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:
FLORENCE ELLEN ETHINGTON
1100 ROBIN LN
EMMETT, ID 83617

(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
☑Mgr ☐Mem	Florence Ellen Ethington	1100 Robin Lane	Emmett, ID, 83617
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			
☐Mgr ☐Mem			

(5) Signature: *Florence Ellen Ethington*   (6) Date: *Feb 21-2023*

(7) Type/Print Name: *Florence Ellen Ethington* (8) Title: *Manager*

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