									B0291	
	Idaho Limited Liability Company Annual Report Form									
	File online at: sos.idaho.gov					Return completed form within 30 days				
	Due no later than: 07/31/2019					Attn: Annual Reports 450 North 4th Street				
Annual Report: No filing fee if received by the due date.						Boise, ID 83	7/15,			
						Phone: (208	3) 334-230			
SOS Control	Number: 56379	0 Filing Status: Active-Existing							201	
Limited Liabilit	Date Form	ed: 07/24/20	017	Formation I)					
Name and Ma	ailing Address:				(1) Add	or Change Mailir	ng Address:		6	
	ARTH SPRINKL		NDSCAPES	LLC					Ň	
11610 W LANKTREE GULCH RD STAR, ID 83669										
51AK, 10 650	009								PM	
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Registered A	gent (RA) and	Registered O	ffice (RO) Ac	ldress:	(2) Cha	nge RA and/or R	O Address:		D	
BETTY ATKIN									Ceive	
11610 W LANKTREE GULCH RD STAR, ID 83669								Ľ,		
									Å.	
	Not	e: The Registere	d Office addres	is must be a p	hysical Idaho	address (no po	ostal box).		Ý	
(3) New Regi	stered Agent (F	RA) Signature							<u></u>	
						ve, the new agent			e appointment.	
(4) Limited Liab These will not b	ility Companies: e accepted. Cha	Enter names ar nges here will n	nd addresses o not affect the er	of Managers (ntity mailing a	OR Members ddress. If m	. Do NOT put ' ore space is ne	same as la eded, plea	ast year' or 's ase add an a	same as abov ě . attachment.	
							City, State, Zip			
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(5) Signature:	setty a	kin	·		(6) Date	7-10	219	×	Lawerenc	
(7) Type/Print Na	Betty C	ARin	us –		(8) Title:	<u>7-1</u>	-61_		ŭ D	
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Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.