



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 01/31/2020

B0421-8498 Return completed form within 30 days t Idaho Secretary of State Attn: Annual Reports 01/23/2020 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300 Formation Locale: ID Received Q City, State, Zip D 83686 NAMPA, ID 83686 Н ZΛ æ

Annual Report: No filing fee if received by the due date. SOS Control Number: 487397 Filing Status: Active-Existing Date Formed: 01/13/2016 Limited Liability Company (D) (1) Add or Change Mailing Address: Name and Mailing Address: MOMBACHO LLC 207 W SHERIDAN AVE NAMPA. ID 83686-2716 (2) Change RA and/or RO Address: Registered Agent (RA) and Registered Office (RO) Address: **RONALD GALLOWAY** 207 W SHERIDAN AVE NAMPA, ID 83686 (CANYON COUNTY) 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** 207 W SHERIDAN AUE KONALD GAL Mgr Mem UDY GALLOWAY 207 WSHERIDAN AKE ☐ Mgr ☐ Mem Mgr Mem Mgr Mem Mgr Mem Mgr Mem ☐Mgr ☐Mem Mgr Mem ø Mgr Mem Mgr Mem awer 14-JAW-2020 (6) Date: (5) Signature: (7) Type/Print Name:

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

Denney