

Idaho Limited Liability Company Annual Report Form



Return completed form within 30 days to:

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

		mited Liability at: sosbiz.idaho.gov	Company	Annual Report Form	- -58888
Return completed for	ys to:	Г			
Idaho Secretary of State Attn: Annual Reports				For Office Use Only	12
450 North 4th Street				-FILED-	2
Boise, ID 83720				File #: 0005376539	
Phone: (208) 334-2300				Date Filed: 8/31/2023 12:17:00 PM	00
Annual Report: No filing fee	if received by t	he due date.		Due no later than: 08/31/202	2 ₃ [2]
SOS Control Number: 90007	Filing Sta	atus: Active-Existing			
Limited Liability Company (D)	Date For	med: 08/19/2003	Formatio	n Locale: ID	23
Name and Mailing Address:		(1) A	Add or Change Ma	ailing Address:	
GOLDEN RULE MANAGEMENT, LLC 13 SHORT ST WEISER, ID 83672-1226					12:17 PM
GLENNA SCHIEDEL 13 SHORT ST WEISER, ID 83672 Note: The Reg (3) New Registered Agent (RA) Signal (4) Limited Liability Companies: Enter name	ature: If a new		above, the new age	ent must sign here to accept the appointme	
These will not be accepted. Changes here	will not affect the	entity mailing address. I	If more space is	needed, please add an attachmen	t. n
Manager/Member Name	, B	Business Address		City, State, Zip	Ð
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(5) Signature:	School	(6) [Date: 8	28-2023 ner-manager	an.
(7) Type/Print Name: 6 PN NP	Schie	2de/ (8) T	Title: OW	ner-manager	ary _