

Idaho Limited Liability Company Annual Report Form

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For Office Use Only



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.

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Due no later than: 12/31/2022

SOS Control N	umber: 3363778	Filing Status: Active-Existing	N 2	
Limited Liability Company (D)		Date Formed: 12/06/2018 Form	mation Locale: ID	
Name and Mailing Address: Aerie Terraces LLC PO BOX 2723		(1) Add or Char	(1) Add or Change Mailing Address:	
BOISE, ID 837	01-2723		57 AM	
COLIN CONNE		Office (RO) Address: (2) Change RA	and/or RO Address:	
2291 E AMY AV BOISE, ID 837			Ö E O O	
(3) New Regist	Note: The Register ered Agent (RA) Signatur		ss (no postal box). The wagent must sign here to accept the appointment.	
These will not be	accepted. Changes here will	not affect the entity mailing address. If more spa	<u></u>	
Manager/Member	Name	Business Address	City, State, Zip	
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(5) Signature:	a la	(6) Date:	12-18-22- P	
(7) Type/Print Name	Ecl. / Cov.	\mathcal{I} (8) Title: \mathcal{U}	KIND PARTIE	

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

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