



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Nort Form

Return completed form within 30 days to:

Idaho Secretary of State

Annual Report: No filing fee if received by the due date.				Attn: Annual Reports 450 North 4th Street		
				•	Boise, ID 83720 Phone: (208) 334-2300	
SOS Control N	umber: 324967	Filing Status:	Active-Existing			
		_	ormed: 07/27/2011 Formation Locale: ID		, G	
Name and Mail PUMA, LLC 2256 N WAGGI MERIDIAN, ID	LE PL		(1)	Add or Change Mailing	Address:	
Registered Age DREW F EGGE 2256 N WAGGI MERIDIAN, ID	LE PL 83646	ed Office (RO) Add		Change RA and/or RO		
(4) Limited Liabilit	ty Companies: Enter namaccepted. Changes here	If a new agent	t is appointed in item (2 Managers OR Mem	2) above the new agent m	ust sign here to accep	or 'same as above',
Manager/Member	Name		ness Address	ii more space is nee	City, State, Zip	Tattaorinicita.
Mgr Mem Mgr Mem Mgr Mem Mgr Mem	Drow FF Laure Egge	35CVS 27	207 Rusel	cpl cossa Rd	Mevidian	ID 8)646 CIZ 83645
Mgr Mem Mgr Mem Mgr Mem Mgr Mem) 1
Mgr Mem Mgr Mem Mgr Mem			-			1
(5) Signature: (6) Date: 6-26-2020						
(7) Type/Print Name	BYCW JF.	Eggess	(8)	Title: MCVIII	ber	
Instructions: Legi	ibly complete the form above.	Sign and date this form	and return to the add	dress provided above.		ţ