



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 08/31/2019

Dort Form

Return completed form within 30 days to:
Idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

Annual	Report: No filing		Boise, ID 83720 Phone: (208) 334-2300			
SOS Control N	umber: 518601	Filing	Status: Active-Existing	481.77.77.		- · · · · · · · · · · · · · · · · · · ·
Limited Liability Company (D) Date		Formed: 08/29/2016 Formation		Locale: ID		
Name and Mail DRIVEN MECH 4572 W GREY MERIDIAN, ID	IANICAL LLC TOWERS ST		(1) Add or Change Mailing Address:			£ .
WENDIAN, ID	03042					• 1 • -
Registered Ag MICHAEL D PE 4572 W GREY MERIDIAN, ID	TOWERS ST	stered Office (R	O) Address: (2)	Change RA and/or R	O Address:	
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.						
These will not be	accepted. Changes	names and addres	ses of Managers OR Meml the entity mailing address.	pers. Do NOT put '	same as last year' or 's eeded, please add an a	ame as above
Manager/Member Mem Mem	Name	_	Business Address		City, State, Zip	2542
Mgr Mem	MICLOUI D	Proson	4572 w grey	Tows st	Meridian ID	2 5 8 7 C
Mgr Mem Mgr Mem						
(5) Signature:	M		(6)	Date: /0 - 2	8-19	()
(7) Type/Print Name	e: Michael	D Pearson	(8)	Title: Dure	My	
	<i>y</i> • • • • • • • • • • • • • • • • • • •	1) (2>	<u></u>		-/·n·\)-	

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

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