



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 09/30/2020

Annual Report: No filing fee if received by the due date.

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

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SOS Control Number: 518530		Filing Status: Active-Existing	Formation Local) IO
Limited Liability Company (D)		Date Formed: 09/07/2016 Formation Locale: ID		פו וט
Name and Mai	-	(1)	Add or Change Mailing Add	ress: O
2715 NORTH I	•			U
416 E FOSTER				σ
COEUR D'ALE	:NE, ID 83814-3045			A
Registered Ag KAREN L VAU 416 E FOSTER COEUR D ALE	RAVE	fice (RO) Address: (2)	Change RA and/or RO Addi	ress: R
	Note: The Registered	l Office address must be a physical le	daho address (no postal b	b
(3) New Regis	tered Agent (RA) Signature:			co hara to account the appointment
.		If a new agent is appointed in item (2		gir nere to accept the appointment
(4) Limited Liabil These will not be	ity Companies: Enter names and accepted. Changes here will no	d addresses of Managers OR Memoral of the entity mailing address.	bers. Do NOT put 'same If more space is needed	nlease add an attachment
Manager/Member	Name	Business Address	-	, State, Zip
✓ Mgr Mem	Karen Lum Vaugm			wolflene 1d 83814
Mgr ☑Mem	Glenn Alan Vaughur			eurd'Alene 1d 83819
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(5) Signature:	KarenVallon	(6)	Date: 8/17/2020	
(7) Tuno/Drint Mana	or the area threaters		Title: AAGAAGA	
(7) Type/Print Name: Karen Vaughn (8) Title: Manager				
Instructions: Leg	gibly complete the form above. Sign	and date this form and return to the add	lress provided above.	_