







## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney **ANNUAL REPORT** 

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00

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-FILED-

File #: 0003333925

Date Filed: 10/22/2018 10:18:42 PM

| Entity Name and Mailing Address:  |        |  |   |  |
|---|--------|--|---|--|
| BECK AND DELBRIDGE LLC  The file number of this entity on the records of the Idaho Secretary of State is:   |        | 0000524883                                       |   |  |
| Address   |        | 3295 N ALFALFA LOOP<br>POST FALLS, ID 83854-5381 |   |  |
| Entity Details:   |        |  |   |  |
| Entity Status   |        | Active - Existing                                |   |  |
| This entity is organized under the laws of:   |        | IDAHO  |   |  |
| The file number of this entity on the records of the Idaho Secretary of State is:   |        | 0000524883                                       |   |  |
| If applicable, the old file number of this entity on the records of the Idaho Secretary of State was:   |        | W173300  |   |  |
| Registered Agent Name and Address   |        |  |   |  |
| Current Registered Agent  |        | JULIE BECK                                       |   |  |
|   |        | Registered Agent Physical Address                |   |  |
|   |        | 3295 N ALFA                                      |   |  |
|   |        | POST FALLS, ID 83854                             |   |  |
|   |        | Mailing Address                                  |   |  |
| Check here if the registered agent needs to be changed  |        |  |   |  |
| If the agent is an individual, do not put the individual's name on the attention line (then it will show in the address block twice).                                     |        |  |   |  |
| The attention line is used for organizations <i>if</i> they wish to specific a particular individual within the organization to whose attention documents should be sent. |        |  |   |  |
| Limited Liability Company Managers and Members  |        |  |   |  |
| Name of individual or organization  |        | Title  | Address                                 |  |
| LISA DELBRIDGE  | Manage | er   | 911 N RONALD LN<br>POST FALLS, ID 83854 |  |
| The annual report must be signed by an authorized signer of the entity.   |        |  |   |  |
| Lisa Delbridge  |        |  | 10/22/2018                              |  |
| Sign Here   |        |  | <br>Date                                |  |
| Signer's Capacity Owner   |        |  |   |  |