



## **Idaho Limited Liability Company Annual Report Form**

File online at: sos.idaho.gov

Due no later than: 04/30/2019

## port Form Return completed form within 30 days to: United the secretary of State

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

Annual Report: No filing fee if received by the due date.					450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	
•			Status: Active-	-	tion Locale: ID	20 19
Name and Mail BLAIR STOREY 1018 17TH AVE LEWISTON, ID	ing Address: FARMS, L.L.C.				(1) Add or Change Mailing Address:	
Registered Age SANDRA K BLA 1018 17TH AVE LEWISTON, ID	83501	•		(2) Change RA an		Received by
(4) Limited Liabilit	accepted. Changes h	ff a r	ses of Managers he entity mailing	OR Members. Do NO	put 'same as last year' or is needed, please add an	'same as above nattachment
	Name	× 415	Business Add	11.	City, State, Zip	
Mgr Mem (5) Signature:	Sandra H. 3 Sandra K. B		7018	(6) Date: 4-2 (8) Title: 4-2	~~	D 83501 th survey of surve
		oove. Sign and date	this form and return	to the address provided a	bove.	<b>10</b>