



Idaho Corporation Annual Report Form

For Office Use Only Return completed torm within 30 days to:

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|---|--|---------------|-------------------------------|-------------|-------------------|--|--|
| | Idaho Corporation Annual Report Form File online at: sosbiz.idaho.gov Due no later than: 03/31/2022 | | | | | For Office Use Only Return completed form within 30 days to | |
| Annual Report: No filing fee if received by the due date. | | | | | | Attn: Annual Reports File #: 0004722150 450 North 4tn Street Boise, ID Date Filed: 5/2/2022 2:27:00 PM Phone: (208) 334-2300 | |
| SOS Control I Non-Profit Cor | | 385 | Filing Status: Date Formed | | | Formation Locale: ID | |
| Name and Ma G GROUP MII 3555 E 4000 N KIMBERLY, ID | NISTRIES, INC I | | | | (1) Add c | or Change Mailing Address: | |
| JUDITH GOLA 3555 E 4000 N KIMBERLY, IC | Notetered Agent (| te: The Regis | ture: | nust be a p | physical Idaho a | ge RA and/or RO Address: O O O Address (no postal box). | |
| | | business add | | | | lent, Secretary, Treasurer. | |
| Title | Name | | Business | | | City, State, Zip | |
| President | | Golay | 3555 | | 1000 N | Nimberly Jasho 0354) | |
| | tors names and b | usiness addr | esses (with zip code). A | | onal sheet if ned | H | |
| Name | | | Business Address | | | City, State, Zip | |
| (5) Signature: | and I | Islam | | | (6) Date: | 3.15.22 m | |
| (7) Type/Print Name: Byrd Goly | | | | | (8) Title: | D 1 + | |
| Instructions: Le | gibly complete the | e form above. | Sign and date this form | and return | to the address | provided above. | |