



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

File online at: sosbiz.idaho.gov

Due no later than: 10/31/2020

port Form

Return completed form within 30 days to: 11
Idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Roise ID 83720

Annua	Report: No filing fee if rec	Boise, ID 83720 Phone: (208) 334-2300		!	
SOS Control N Limited Liability	umber: 435602 Company (D)	Filing Status: Active-Existing Date Formed: 10/07/2014	Formation Locale: ID		
Name and Mai JEFS, LLC PO BOX 1084 NAMPA, ID 83		(*	1) Add or Change Maili	ng Address:	
Registered Ag ELWOOD WEE 6904 PARKWA NAMPA, ID 83	YLANE	fice (RO) Address: (2	2) Change RA and/or F	RO Address:	. <del>.</del>
(4) Limited Liabili	ered Agent (RA) Signature ty Companies: Enter names an	d Office address must be a physical  If a new agent is appointed in item  d addresses of Managers OR Mer of affect the entity mailing address	(2) above, the new agent	must sign here to accept the	ame as above
Manager/Member	Name	Business Address		City, State, Zip	
Mgr ☐ Mem	ELWOOD WEBB, IV	5/2 LAKEUMW DY	( H.D.	CASONIE ID	83611
Mgr Mem	FRANCES M. WEB	•		CASONAL ID.	836//
Mgr Mem Mgr Mem Mgr Mem Mgr Mem	JAMIE B. WEBB		THE AUE	LAKEWSOD, CD	80228
Mgr Mem					
Mgr Mem					
Mgr Mem					
MgrMem MgrMem				<del> </del>	
☐ Mgr ☐ Mem			<del></del>	<del>-</del>	
	<b>4</b>	<b>-</b>			
(5) Signature:	( Will	(6	6) Date: 9/13/	12020	
(7) Type/Print Name	ELWOOD WERD		3) Title: Name &	er	
Instructions: Leg	ibly complete the form above. Sign	and date this form and return to the a	ddress provided above		

Denne