



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 11/30/2021

DOORT FORM

Return completed form within 30 days to:

Idaho Secretary of State

Annual Report: No filing fee if received by the due date.					450 North 4th Street			;
					Boise, ID 83720 Phone: (208) 334-2300			
SOS Control Number: 400395 Filir			us: Active-Exist	ting				
Limited Liability Company (D)		Date Form	Date Formed: 11/07/2013			Formation Locale: ID		
Name and Mai	- II O		(1) Add	d or Change Mai	ling Address:		-	
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COUNCIL, ID	33612-0842							_
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Registered Ag	ent (RA) and Registered	d Office (RO) A	ddress:	(2) Cha	ange RA and/or	RO Address:		7. 0. 0.
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COUNCIL, ID 83612							F	
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	Note: The Regis	stered Office addre	ss must be a physi	ical Idah	o address (no p	ostal box).		Ą
(3) New Regist	ered Agent (RA) Signat	ture:						<u> </u>
		If a new a	gent is appointed in ite	em (2) ab	ove, the new ager	nt must sign here to a	ccept the	appointment [
	ty Companies: Enter name accepted. Changes here v							
Manager/Member	Name		Business Address			City, State, Zip		
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(5) Signature:	apene (2)	Muy de	on	(6) Dat	e: //-/	-2001		
(7) Type/Print Nam	e: VALERTE (Shane Dr	M /	(8) Title	a: /6-11	DWNER		
		The state of the s	T. M.				-	ì
Instructions: Leg	ibly complete the form above.	Sign and date this f	form and return to th	e addres	s provided abov	e.		t