



Idaho Limited Liability Company Annual Report Form

File online at: SOSBIZ.idaho.gov

Due no later than: 04/30/2019

Reporting Year: 2018

Return completed form within 30 days to:

Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise, ID 83720
Phone: (208) 334-2300

Annual Report: No filing fee if received by the due date.

SOS Control Number: 601822

Filing Status: Active-Existing

Limited Liability Company (D)

Date Formed: 04/10/2018

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

SURE THING AUTO, LLC
606 E SELTICE WAY
POST FALLS, ID 83854

Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

UNITED STATES CORPORATION AGENTS INC
800 W MAIN ST STE 1460
BOISE, ID 83702

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Daniel Pilcher (owner)	606 E. Seltice way	Post Falls, ID, 83854
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Dustin Pilcher (owner)	606 E. Seltice way	Post Falls, ID, 83854
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

Daniel Pilcher

(6) Date:

3/31/19

(7) Type/Print Name:

Daniel Pilcher

(8) Title:

Owner

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

B0167-9706 04/03/2019 9:12 AM Received by ID Secretary of State Lawrence Denney