Idaho Limited Liability Company Annual Report Form File online at: sosbiz.idaho.gov				E0823-
	Return completed form within 30 Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	days to:	For Office Use Only -FILED- File #: 0005407053 Date Filed: 9/18/2023 1:51:00 PM	-5448 09/
Annual Report: No filing fee if received by the due date.				
SOS Control N Limited Liability	-	Status: Active-Existing Formed: 10/15/2013 For	mation Locale: ID	2023
Name and Mailing Address:(1) Add or Change Mailing Address:INTERIORS BY CHARLOTTE L.L.C.501 E 12TH AVEPOST FALLS, ID 83854-7629				1:51 PM
Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address: CHARLOTTE RODGERS-ROE 501 E 12TH AVE POST FALLS, ID 83854 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 appointm				
(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 Charlotte Rodgers-Rod	Business Address	City, State, Zip Post Falls, Id 838	• 5#/ the
Mgr Mem Mgr Mem Mgr Mem Mgr Mem) Idaho
Mgr Mem Mgr Mem Mgr Mem			12 909 21	Secretai
(5) Signature: (1) Type/Print Name: Charlotte Rodgers-Rue (8) Title: OWNER				

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