

Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Return completed form within 30 days to:

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

For Office Use Only

B0763-5204

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	450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300			le #: 0005099609 ate Filed: 2/7/2023 1:35:00 PM	02/
Annua		received by the due date.]	Due no later than: 01/31/20	023
SOS Control N	Number: 3396625	Filing Status: Active-Existing			202
imited Liability	Company (D)	Date Formed: 01/14/2019	Formation I	Locale: ID	W
Name and Mai Alpha Quality II 13 49 N EL CAI KUNA, ID 836	MINO-AVE		1) Add or Change Mailir	ng Address:	1:35 PM
					II.
Registered Ag FRANCISCO \ 730 WASHING FWIN FALLS,	STON ST S	1 Office (RO) Address:	2) Change RA and/or R	O Address.	ceived
4) Limited Liabil	itered Agent (RA) Signat	tered Office address must be a physical cure: Fram C15 (O) If a new agent is appointed in item and addresses of Managers OR Melvill not affect the entity mailing address	(2) above, the new agent	must sign here to accept the appointment of the same as last year' or 'same as	above Ω
Manager/Member	Name	Business Address		City, State, Zip	<u>.</u>
Mgr Mem Mgr Mem Mgr Mem	Froncisco VA	130 Wash	inglon Si	1 min falls	(0)
Mgr Mem				8550	he Idaho Secret
Mgr Mem	Francisco	VAZQUZZ (E O VAZQUZZ (E	i) Date: 02-	o7-2023 rnzr managingme	he Idaho Secretary