



(7) Type/Print Name:

72 2 72 7	Idaho Limited Liability Company Annual Report Form			
F	File online at: SOSBIZ.idaho.gov Due on/Before: 11/30/2018 Reporting Year: 2018		Return completed form within 30 days to Idaho Secretary of State Attn: Annual Reports	
Annual Repor	t: No filing fee if received	l by due date.	700 West Jefferson, E205	
If reinstatement is required, the reinstatement fee is \$30.00. 450 North 4th Street Boise, ID 83702				
			Phone: (208) 334-2300	
SOS Control N	umber: 580756	Filing Status: Active-Existing		
_imited Liability	Company (D)	Date Formed: 11/24/2017	Formation Locale: ID	
Name and Mailing Address: (1) Add			dd or Change Mailing Address:	
	IDER RANCH, LLC			
PO BOX 480 ASHTON, ID 8:	3420	7000000		
		· munors or		
Registered Agent (RA) and Registered Office (RO) Address: (2) Cha			hange RA and/or RO Address:	
000 N 3925 E	·			
ASHTON, ID 8	3420			
	Note: The Register	red Office address must be a physical Ida	ho address (no postal box).	
3) New Regist	ered Agent (RA) Signatur	e:		
hese will not be	accepted. Changes here will	and addresses of Managers OR Membe not affect the entity mailing address. If	ers. Do NOT put 'same as last year' or 'same more space is needed, please add an attach	as above nment.
Manager/Member Mgr Mem	Name	Business Address	City, State, Zip	
Tiviði [Tivieiii				
MgrMem				
Mgr Mem				
Mgr Mem Mgr Mem Mgr Mem		ll l		
Mgr Mem Mgr Mem Mgr Mem Mgr Mem				
Mgr Mem Mgr Mem Mgr Mem				

(8) Title: REGISTERED Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.

lawerence Denney