



## **Idaho Limited Liability Partnership Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 09/30/2021

Report Form

Return completed form within 30 days to: Unidaho Secretary of State

Idaho Secretary of State Attn: Annual Reports

		Attn: Annual Reports 450 North 4th Street	Ø,
Annual Report: No filing fee if received by the due date.		Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 14310	Filing Status: Active-Existing	5	N 2
Limited Liability Partnership (D)	Date Formed: 09/19/2011	Formation Locale: ID	<u>_</u>
Name and Mailing Address:	(1) A	dd or Change Mailing Address:	<b>H</b>
GUMBO LLP			N.
PO BOX 46			N
SUN VALLEY, ID 83353-0046			1
Registered Agent (RA) and Registered	I Office (RO) Address: (2) C	hange RA and/or RO Address:	<u> </u>
LYNN T LEVY SR	` ,		
103 WEDELN LANE			ä
SUN VALLEY, ID 83353			5
			(I
Note: The Regist	tered Office address must be a physical Ida	ho address (no postal box).	
_		, , ,	γ
(3) New Registered Agent (RA) Signate		bove, the new agent must sign here to accept the appoint	
(4) Limited Liebility Bortnershine: Enter name			tment
		Do NOT put 'same as last year' or 'same as ab	ove'.
These will not be accepted. Changes here w	ill not affect the entity mailing address. If	more space is needed, please add an attachm	ove'. ent.
These will not be accepted. Changes here w	ill not affect the entity mailing address. If Business Address	more space is needed, please add an attachm  City, State, Zip	ove'. ent.
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These will not be accepted. Changes here w  Name  LYL'N T. LEVY	Business Address  103 WEDENIN LANG	City, State, Zip	ove'. ent. 3317
These will not be accepted. Changes here w  Name  LYL'N T. LEVY	Business Address  103 WEDENIN LANG	City, State, Zip	ove'. ent. 3377
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These will not be accepted. Changes here w  Name  LYL'N T. LEVY	Business Address  103 WEDENIN LANG	City, State, Zip	ove'. vent. 33372
These will not be accepted. Changes here w  Name  LYL'N T. LEVY	Business Address  103 WEDENIN LANG	City, State, Zip	ove'. gent. 7
Name LYL'N T LEVY	Business Address  103 WEDENIN LANE  LI3 ARBY ROAD	City, State, Zip	ove'. vent. 33372

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