



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

File online at: sos.idaho.gov

Due no later than: 12/31/2019

Nort Form
Return completed form within 30 days to:
Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise, ID 83720

Annual Report: No filing fee if received by the due date.					Boise, ID 83720 Phone: (208) 334-2300		
SOS Control Number: 218646 Limited Liability Company (D)			Status: Active	_	Formation Locale: ID		201
Name and Mai SIMUNICH MC 2715 N VENAB MERIDIAN, ID	ling Address: CALL, LLC LE AVE				Change Mailir		9 9:20 AM
Registered Ag JOSEPH SIMU 2715 N VENAB MERIDIAN, ID	NICH LE AVE	Registered Office (R	O) Address:	(2) Chang	e RA and/or R	O Address:	Re ce i ve d
	tered Agent (F	If a	new agent is appoin	ted in item (2) above.	the new agent	must sign here to accept the	ame as abov <b></b>
Manager/Member	Name	nges here will not affect	ill not affect the entity mailing address. If more space is ne			City, State, Zip	
Mgr Mem	7	Cia	2715	1/ //-	Aue	Daly, State, Zip	T 1 02/2
☐Mgr ☐Mem	JO Sept	31: Month 129	+~//	Venus / ~	PV -	Harris Lan	<u> </u>
∭Mgr ∏Mem	Hath	Jerm Simun	117715	Vesabla	Aur	Mendias I	6 8366
☐ Mgr ☐ Mem	1000		7.7.7.	p La project	7102		
Mgr Mem							- O
Mgr Mem							<del></del>
Mgr Mem		·····			- · · · ·		ct
Mgr Mem				<u>-</u>			Qi ct
Mgr Mem		····					
Mgr Mem					<del> </del>	<b> </b>	<del>[</del>
Mgr Mem					•	1	<u> </u>
(5) Signature:	Nos	W. Smm	h	(6) Date:	11/2	3/2019	_awerence
(7) Type/Print Nam	/_	, <u> </u>	,	(8) Title:	1,21		š

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