

Idaho Limited Liability Company Annual Report Form

Return completed form within 30 days to:

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| Limited Liabilit | y Company (D) | Date Formed: 12/ | 14/2009 For | mation Locale: ID | 23 |
| Name and Ma ROBERT FRA PO BOX 247 NAMPA, ID 8 | | ·· | (1) Add or Che | inge Malling Address: | 9:31 AM |
| NAMPA, ID 83 | CLIN RD STE 200 067 Note: The Regis tered Agent (RA) Signat | If a new agent is app | be a physical Idaho add | e new agent must sign here to accep | の が なt the appointment.H |
| (4) Limited Liabili These will not be | ty Companies: Enter name: accepted. Changes here w | s and addresses of Mana rill not affect the entity ma | gers OR Members. Do lling address. If more s | NOT put 'same as last year' pace is needed, please add a | or 'same as above'. an attachment. Ω |
| Manager/Member | Name | Business | Address | City, State, Zip | ······································ |
| ☐ Mgr ☐ Mem ☐ Mgr ☐ Mem | ROBERT FRANZ | POST OFFICE BOX 247 | NAMPA, ID | USA 83653-0247 | — О На. |
| Mgr Mem | | | | | <u> </u> |
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| _ , _ , , | | | | | D D |
| 5) Signature: | py | | (6) Date: | 11/28/2023 | <u> </u> |
| 7) Type/Print Name | ROBERT FRANZ | | (8) Title: | / MEMBER | 7.7 |
| Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above. | | | | | о Н |