



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 05/31/2019

port Form

Return completed form within 30 days tell Idaho Secretary of State

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

| Annual Report: No filing fee if received by the due date. | | | | l · | Boise, ID 83720 Phone: (208) 334-2300 | |
|--|---|---|-------------------------|--|---|--------------|
| SOS Control N | umber: 289519 | Filing St | atus: Active-Existing | } | | 201 |
| Limited Liability | Company (D) | Date Fo | rmed: 05/14/2010 | Formation | Locale: ID | 91 |
| Name and Mai | ling Address: | | (C | 1) Add or Change Maili | ng Address: | G |
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| PRESTON, ID | 83263 | | | | | AM |
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| Registered Age DOUGLAS WE 215 E 200 S PRESTON, ID | | ered Office (RO) | Address: (2 | (2) Change RA and/or RO Address: (2) Change RA and/or RO Address: (2) Change RA and/or RO Address: (2) Change RA and/or RO Address: | | |
| (3) New Regist | Note: The R | nature: | ress must be a physical | | ostal box). must sign here to accept the | H A |
| (4) Limited Liabilit These will not be | ty Companies: Enter na accepted. Changes he | imes and addresse re will not affect the | s of Managers OR Mer | mbers. Do NOT put | same as last year or 'sa eeded, please add an at City, State, Zip | ame as above |
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| (5) Signature: | hufm K | Wut R Wt | (6 | s) Date: 5- 6 3) Title: Member | -19 | Lawerence |
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Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.