



Idaho Limited Liability Company Annual Report Form

File online at: sos.idaho.gov

Due no later than: 05/31/2019

Reporting Year: 2019

Return completed form within 30 days to:

U) U)

XXXX I SAN

janer II Parer II

Ü

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

	de no later than. 00/01	72015 Reporting real	Aui.	Annual Reports orth 4th Street	
Annual Report: No filing fee if received by the due date.				Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Nu	umber: 553410	Filing Status: Active-E	xisting		
Limited Liability Company (D) Date		Date Formed: 05/08/20)17 Forma	ation Locale: ID	
Name and Mail 601 MAIN STRE PO BOX 2431 KETCHUM, ID	EET, LLC		(1) Add or Chang	e Mailing Address:	
Registered Age ROBERT F SIN 371 RIVER STR KETCHUM, ID	CLAIR REET W #6	ed Office (RO) Address:	(2) Change RA ar	nd/or RO Address:	
(4) Limited Liability		If a new agent is appointed uses and addresses of Managers (OR Members. Do NO	y agent must sign here to accept the appointment. T put 'same as last year' or 'same as about is needed, please add an attachment.	
Manager/Member	Name	Business Add		City, State, Zip	
X Mgr Mem Mgr Mem	Robert F Sinc	lair PO Box 24	31	Ketchum ID 83340	
(5) Signature:	Pf Smc	lair	(6) Date: 04	1/25/19 INEN	
(7) Type/Print Name	: RUBERT F.	SINCLAIR	(8) Title: Ο <i>μ</i>	NEW	

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