



Idaho Limited Liability Company Annual Report Form

File online at: SOSBIZ.Idaho.gov

Due on/Before: 09/30/2018

Reporting Year: 2018

Return completed form within 30 days to:

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83702

Phone: (208) 334-2300

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| If | reinst | atement | is required | i, the | reinstatem | ent fee | is \$30. | 00. |

SOS Control Number: 112332 Limited Liability Company (D)

Filing Status: Active-Existing

Date Formed: 09/13/2004

Formation Locale: ID

(1) Add or Change Mailing Address:

Name and Mailing Address:

TOUCH STONE MEMORIES & CO. LLC

P.O. BOX-68092

PORTLAND, OR 97268

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(2) Change RA and/or RO Address:

JERRY SMITH 291 NORTH BROADWAY BLACKFOOT, ID 83221

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

| Manager/Member | Name | Business Address | City, State, Zip |
|-----------------------|---|--|-----------------------|
| Mgr Mem | Ivene Beard | P.O. Box 68091 | Postland OR 97268 |
| ☐Mgr ☑Mem | Colton J. Beard | 3933 Gandaiper | Pocatello, T.L 8:3201 |
| Mgr Mem | | | |
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| ☐Mgr ☐Mem | | | |
| MgrMem | | | |
| MgrMem , | 1 | | |
| (5) Signature: | there Divis | (6) Date: / 久 / 3 | 1-2018 |
| (7) Type/Print Nam | e: Trens Beard | (8) Title: Man | ager |
| landania (landa landa | the complete the form shows. England a sh | ack made nevente to the idaha Secretary of | |

instructions: Legibly complete the form above. Enclose a check made

Sign and date this form and return to the address provided above.