





## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney
ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00 For Office Use Only

-FILED-

File #: 0004767172

Date Filed: 6/3/2022 12:25:21 PM

| Entity Name and Mailing Address:  |                               |                                |            |  |
|---|-------------------------------|--------------------------------|------------|--|
| Entity Name:  |                               | COTTAGES NAMPA LLC             |            |  |
| The file number of this entity on the records of the Idaho Secretary of State is: |                               | 0000617473                     |            |  |
| Address   |                               | 1079 S ANCONA AVE              |            |  |
|   |                               | STE 110                        |            |  |
|   |                               | EAGLE, ID 83616-5539           |            |  |
| Entity Details:   |                               |                                |            |  |
| Entity Status   |                               | Active-Existing                |            |  |
| This entity is organized under the l  | aws of:                       | IDAHO                          |            |  |
| If applicable, the old file number of the Idaho Secretary of State was:           | this entity on the records of | W204878                        |            |  |
| The registered agent on record is:  |                               |                                |            |  |
| Registered Agent  |                               | MARK MAXFIELD                  |            |  |
|   |                               | Registered Agent               |            |  |
|   |                               | Physical Address               |            |  |
|   |                               | 1079 S ANCONA AVE<br>SUITE 110 |            |  |
|   |                               | EAGLE, ID 83616                |            |  |
|   |                               | Mailing Address                |            |  |
|   |                               |                                |            |  |
| Agent or Address Change   |                               |                                |            |  |
| Select if you are appointing a  | new agent.                    |                                |            |  |
| Limited Liability Company Managers and Mer  | nbers                         |                                |            |  |
| Name  | Title                         | Busines                        | s Address  |  |
| Mark Maxfield   | Manager                       | 1079 S ANCONA AVE              |            |  |
|   |                               | STE 110                        |            |  |
|   |                               | EAGLE, ID 83616-5539           |            |  |
|   |                               |                                |            |  |
| The annual report must be signed by an author Job Title: Manager                  | orized signer of the entity.  |                                |            |  |
| Mark Maxfield   |                               |                                | 06/03/2022 |  |
| Sign Here   |                               |                                | Date       |  |
|   |                               |                                |            |  |