



STATE OF IDAHO

**STATE OF IOWA
Office of the secretary of state, Phil McGrane
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 #: 0005818898

Date Filed: 7/12/2024 5:42:36 PM

<p>Entity Name and Mailing Address:</p> <p>Entity Name: Hemppurpose Llc</p> <p>The file number of this entity on the records of the Idaho Secretary of State is: 0005298562</p> <p>Address PO BOX 60 LAPWAI, ID 83540-0060</p>											
<p>Entity Details:</p> <p>Entity Status Active-Existing</p> <p>This entity is organized under the laws of: IDAHO</p> <p>If applicable, the old file number of this entity on the records of the Idaho Secretary of State was:</p>											
<p>The registered agent on record is:</p> <p>Registered Agent ALL DAY \$49 IDAHO REGISTERED AGENT LLC Commercial Registered Agent Physical Address 784 S CLEARWATER LOOP STE F POST FALLS, ID 83854</p> <p>Mailing Address 784 S CLEARWATER LOOP STE F POST FALLS, ID 83854</p>											
<p>Agent or Address Change</p> <p><input checked="" type="checkbox"/> Select if you are appointing a new agent.</p> <p>The name and street address of the new registered agent and office in Idaho is:</p> <p>Registered Agent REGISTERED AGENTS INC Commercial Registered Agent Physical Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854</p> <p>Mailing Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854</p> <p><input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.</p>											
<p>Limited Liability Company Managers and Members</p> <table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Business Address</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> shana mary allen</td> <td>Manager</td> <td>NEZ PERCE DR. #2 LAPWAI, ID 83540</td> </tr> <tr> <td><input checked="" type="checkbox"/> sean j blackwell</td> <td>Member</td> <td>NW TURNER DR. 1570 PULLMAN, WA 99163</td> </tr> </tbody> </table>			Name	Title	Business Address	<input checked="" type="checkbox"/> shana mary allen	Manager	NEZ PERCE DR. #2 LAPWAI, ID 83540	<input checked="" type="checkbox"/> sean j blackwell	Member	NW TURNER DR. 1570 PULLMAN, WA 99163
Name	Title	Business Address									
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The annual report must be signed by an authorized signer of the entity.

Job Title: Manager



Shana Mary Allen

Sign Here

07/12/2024

Date