



Idaho Limited Liability Partnership Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 03/31/2022

Report Form

Return completed form within 30 daysdb:
Idaho Secretary of State

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

Annual Report: No filing fee if received by the due date.			450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 3204	Filing Status: Active-Exist	ing		N 2
Limited Liability Partnership (D)	Date Formed: 03/24/1999	F	ormation Locale: ID	22
Name and Mailing Address:		(1) Add or C	hange Mailing Address:	—
ELITE RIFLE WORKS LLP				
6045 DEER FLAT RD NAMPA, ID 83686-9449				0
10/10/11/15/ 00000-0440				PM
Registered Agent (RA) and Registered Agent (tered Office (RO) Address:	(2) Change	RA and/or RO Address:	전 연 연
6045 DEERFLAT RD.				Σίγ
NAMPA, ID 83686				æ
Space (2 words L	ite above)			ው
Note: The i	Registered Office address must be a physi	cal Idaho ado	lress (no postal box).	Λq
(3) New Registered Agent (RA) Si	anaturo			, L
	If a new agent is appointed in ite	em (2) above, th	ne new agent must sign here to accept th	e appointment
(4) Limited Liability Partnerships: Enter These will not be accepted. Changes h	names and addresses of 2 or more Part ere will not affect the entity mailing addre	ners. Do NO	OT put 'same as last year' or 'sam space is needed, please add an a	e as above ²
Name	Business Address		City, State, Zip	
Jim Combe	6045 Deer Flat	Rd.	Namsa Id. 83	686 t
Ray Combe	3275 East Whitm	an Dri	ru Boise Id 837	16
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(5) Signature:	-	(6) Date:	6/1/22	
(7) Type/Print Name: Jim C	combe	(8) Title:	partner	e n
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