



Idaho Limited Liability Company Annual Report Form

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Due no later than: 01/31/2022

Dort Form Return completed form within 30 days to:

Idaho Secretary of State Attn: Annual Reports

Annua	l Report: No filing fee if r	Boise, ID 83	450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300		
SOS Control Number: 3752006		Filing Status: Active-Existing			N
Limited Liability Company (D)		Date Formed: 01/22/2020	Formation L	ocale: ID	, , , , , , , , , , , , , , , , , , ,
Name and Mai MAGA SOLUTI APT 101 5812 W CLEAF BOISE, ID 837	ONS LLC		(1) Add or Change Mailin	g Address:	1 . T . ALI
Registered Agent (RA) and Registered Office (RO) Address: VINCENT B VIDEGAIN 5812 W CLEARVIEW LN APT 101 BOISE, ID 83703 Note: The Registered Office address must be a physical Idaho address (no postal box).					X @ C @ L \ @ Q .
(4) Limited Liabili	tered Agent (RA) Signature ty Companies: Enter names accepted. Changes here will		Members. Do NOT put 's	nust sign here to accept the appoint same as last year' or 'same a eded, please add an attachm	s above
Manager/Member	Name	. Business Addres	is	City, State, Zip	
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(5) Signature: (7) Type/Print Name	e: (Vincent B)	1 Idejain	(6) Date: — /	14-22	
Instructions: Leg	ibly complete the form above. Si	gn and date this form and return to the	ne address provided above.		α -