

Name and Mailing Address:

(3) New Registered Agent (RA) Signature:



Idaho Limited Liability Company Annual Report Form

Idaho Limited Liability Company Annual Report Form									
	File online at: SOSBIZ.idaho.gov				Return completed form within 30 day				
0.10	Due on/Before:	06/30/2015	Report	ting Year: 2015	Idaho Secretary of Sta Attn: Annual Reports	te W			
	_	e if received by dithe reinstatement f	450 North 4th Street Boise, ID 83702 Phone: (208) 334-230	13/1					
SOS Control	Number: 2017	739 Fil	•	Inactive-Dissolved (Administrative)	□ R	einstate Entity (\$30 fee			
imited Liabili	ty Company (D)	Da	ate Formed:	06/11/2007	Formation Locale: I	D 19			

Registered Agent (RA) and Registered Office (RO) Address:	(2) Change RA and/or RO Address:
IDAHO FALLS, ID 83406	Figging to Suye
3456 E 17TH STREET	207 Stock from BLVd
GY, LLC	GT, LLC

(1) Add or Change Mailing Address:

Received by

NO AGENT AGENT RESIGNED OR INVALID BOISE, ID 83702 (ADA)

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

Manager/Member	Name	Business Address	City, State, Zip
Mgr Mem	GUANA HUA INIA	207 STOCKHAM BUD	PIARY 10 83442
Mgr Mem			
Mgr Mem			· ·
Mgr Mem			
Mgr Mem			
5) Signature:	1/1/	(6) Date: 2_/	: 91,9
)) Signature.		(0) Date. 2_/	19119
7) Type/Print Nam	e: Guans Wha Wo	(8) Title:	Inex
Instructions: Lec		check made payable to the Idaho Secretary of S	

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