



Idaho Limited Liability Company Annual Report Form

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Dort Form

Return completed form within 30 days to:

Idaho Secretary of State Attn: Annual Reports

Due no later than: 03/31/2022 Annual Report: No filing fee if received by the due date.					Attn: Annual Reports 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300			02/0
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			ng Status: Active-Existing					2 2
Limited Liability Company (D)		Date F	te Formed: 03/20/2009 Formation L				.ocale: ID	N
Name and Mailing Address: L. L. CROW FAMILY, LLC PO BOX 216 CRAIGMONT, ID 83523-0216			(1) Add or Change Mailing Address:					11:04 AM
Registered Ag LALISA R THO 320 N 2ND AVI CRAIGMONT,	E	red Office (RO) Address:	(2) (Change R	A and/or R	O Address:	Received
	Note: The Registered Agent (RA) Sign	If a n	ew agent is appo	pinted in item (2)	above, the	new agent	must sign here to accept th	
	ne entity mailing address. If more space is needed, please add an at					attachmer		
Manager/Member Mgr Mem	Name		Business /				City, State, Zip	
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(5) Signature:	la Lia R. I	homasa		(6)	Date: /	1291	2012	aweren
(7) Type/Print Name	e: La Lisa R.	Thoma	SOU	(8) 1	Title: V	Man	2012 ager	O C
Instructions: Leg	jibly complete the form above	e. Sign and date t	his form and re	turn to the add	ess provi	ded above.		ש