



Idaho Limited Liability Company Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 10/31/2018

Reporting Year: 2018

Return completed form within 30 days to:

Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise, ID 83702
Phone: (208) 334-2300

Annual Report: No filing fee if received by due date.
If reinstatement is required, the reinstatement fee is \$30.00.

SOS Control Number: 214323
Limited Liability Company (D)

Filing Status: Active-Existing
Date Formed: 10/22/2007

Formation Locale: ID

Name and Mailing Address:
JUAN'S A-2-Z POOL & SPA LLC
PO BOX 191336
BOISE, ID 83719

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:
JUAN HERRERA
481 LILLY DR.
BOISE, ID 83713

(2) Change RA and/or RO Address:

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

(3) New Registered Agent (RA) Signature:

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	JUAN HERRERA	P.O. Box 191336	BOISE ID 83719-1336
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem		481 Lilly Dr	BOISE ID 83719-1336
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: JUAN HERRERA

(6) Date: 11-6-18

(7) Type/Print Name: Juan Herrera

(8) Title: OWNER

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.

B0027-3532 11/06/2018 2:44 PM Received by ID Secretary of State Lawrence Denney