

Idaho Limited Liability Company Annual Report Form



Return completed form within 30 days to: Idaho Secretary of State Attn: Annual Reports

450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

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Annua	Report: No filing fee if	received by the due date.	_	Due no later than: 07/3	} 1/202 ()
SOS Control N Limited Liability	umber: 5321910 Company (D)	Filing Status: Active-Existin Date Formed: 07/13/2023	g Formation L	ocale: ID	2024
Name and Mai Morris Meadow 6757 S MARSH MCCAMMON,	s, LLC		(1) Add or Change Mailin	g Address:	11:42 AM
J. Dean Morris 6757 S MARSH MCCAMMON,	ID 83250-1510	ered Office address must be a physica	(2) Change RA and/or RC		Received by
(4) Limited Liabili	ity Companies: Enter name	If a new agent is appointed in items and addresses of Managers OR Me ill not affect the entity mailing addres	embers. Do NOT put 's	same as last year' or 'same	e as ab d ve
Manager/Member	Name	Business Address		City, State, Zip	Ď
Mgr	J. Dean Morris	5 C757 S Mar	sh Creck Rd	McCammon 10	U3260 H the I daho S
Mgr Mem (5) Signature:	& Man Ma	Nos	(6) Date: P ~ /	16-2024 ager	#C15#
(7) Type/Print Nam	e: J Dean Mo	co's	(8) Title: Mgh	ager	ary

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.