

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845
corpinfo@state.sd.us

AMENDED ANNUAL REPORT DOMESTIC LIMITED LIABILITY COMPANY

SDCL 47-34A-211; 47-1A-122;
59-11-24, 24.1

FILING FEE: \$25

Make check payable to SECRETARY OF STATE

Enter Filing Year

1. Business ID and Name:

Business ID

Business Name

You may amend any of the information below. If you are not amending a section, please leave that section blank.

2. The address of the principal executive office (*business address*).

Actual Street Address City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

Email Address (*Optional*)

3. The names and business addresses of its principal officers and directors (governors): see SDCL 59-11-24.

Manager/Governor Actual Street Address City State ZIP+4

Manager/Governor Actual Street Address City State ZIP+4

Manager/Governor Actual Street Address City State ZIP+4

4. Beneficial Interest (*optional*)

Owner Description of Ownership Percentage/Value

Owner Description of Ownership Percentage/Value

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a criminal penalty (SDCL 22-39-36).

Dated _____

Signature of an authorized person

Email _____
(*Optional*)

Printed Name