

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

**ANNUAL REPORT**  
**FOREIGN LIMITED LIABILITY COMPANY**  
SDCL 47-34A-211; 59-11-24, 24.1

**FILING FEE: \$65**  
**Additional Fee for Delinquent Reports: \$50**

Enter Filing Year

1. Business ID and Name:

Business ID

Business Name

2. The jurisdiction under whose law it is formed \_\_\_\_\_

3. 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*)

4. The South Dakota Registered Agent's name:

South Dakota law permits the registered agent **to be either: A)** noncommercial registered agent (this may be an individual) or **B)** a commercial registered agent. **Complete only one below, either (a) or (b).**

**(a)** The South Dakota Noncommercial Registered Agent's name \_\_\_\_\_

\_\_\_\_\_  
Actual Street Address in this State City State ZIP+4

\_\_\_\_\_  
Mailing Address in this State, if Different from Street Address City State ZIP+4

\_\_\_\_\_  
Email Address (*Optional*)

**(b)** When listing a Commercial Registered Agent, please state their CRA#. This number can be obtained from the Commercial Registered Agent.

\_\_\_\_\_  
Commercial Registered Agent Name CRA#

5. If the LLC is manager-managed, list the names and addresses of its manager(s). SDCL 59-11-24. If the LLC is member-managed, this section may be left blank.

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

6. 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