2027 – ANNUAL REPORT INSTRUCTION FORM

(MONTANA LLCS)

IMPORTANT! FOLLOW INSTRUCTIONS EXACTLY WHEN COMPLETING THIS FORM. PLEASE PRINT.

Customer ID Number	Notice Date	Business Entity Number	Entity Start Date
[redacted]	09/18/2026	[redacted]	[redacted]

Business Address

[redacted]

Please Respond By:
10/18/2026

Montana laws require every limited liability company registered to do business in the state to timely file an annual report every year. If [redacted] does not file an annual report, your business will receive a notice of upcoming dissolution or revocation.

MONTANA TITLE § 35-8-208 (1): "A limited liability company authorized to transact business in this state shall deliver to the secretary of state, for filing, an annual report..."

If the business entity is still in use, C.P.S., a private entity, will assist for a fee in the filing of your annual report.

C.P.S. IS NOT A GOVERNMENT AGENCY AND DOES NOT HAVE A CONTRACT WITH ANY GOVERNMENTAL AGENCY TO PROVIDE THIS SERVICE.

To utilize this service, follow the steps below. C.P.S. will not disclose any information about your business to any third-party, including competitors, unless required by law. Mail the completed form with **$150.00** to C.P.S. in the enclosed envelope. All orders are fulfilled at our corporate office in Lansing, Michigan. **Please respond today!**

STEP 1. Verify the accuracy of the pre-printed business information. Make any necessary changes and complete any missing information.

Business Mailing Address
[redacted]

Business Physical Address
[redacted]

Describe the Nature of your Business

STEP 2. Registered Agent Information. Make necessary changes and complete any missing information.

Registered Agent Name	Registered Agent Number
[redacted]	
Registered Agent Mailing Address	Email Address
[redacted]	
Registered Agent Physical Address	Website
[redacted]	

STEP 3. Provide the name, email and address of each Member and/or Manager.

Name or Business Entity	Email Address
Business Mailing Address	Active Registered Entity? ☐ Yes ☐ No
Name or Business Entity	Email Address
Business Mailing Address	Active Registered Entity? ☐ Yes ☐ No
Name or Business Entity	Email Address
Business Mailing Address	Active Registered Entity? ☐ Yes ☐ No
Name or Business Entity	Email Address
Business Mailing Address	Active Registered Entity? ☐ Yes ☐ No

STEP 4. PAYMENT INFORMATION Complete payment to file your annual report.

☐ **CHECK ENCLOSED FOR $150.00**
Price includes state fee and C.P.S. processing fee.

Please make your check payable to:
C.P.S.

Further assistance:
Call (406) 412-2905

ALL C.P.S. PRODUCTS AND SERVICES ARE 100% FULLY GUARANTEED.

STEP 5. I authorize an electronic signature on behalf of the limited liability company. I understand that C.P.S. is not a government agency and is not providing legal advice. This is not a bill. This is a solicitation; you are under no obligation to pay the amount stated, unless you accept this offer.

Signature (to be signed by an officer or registered agent) ****REQUIRED****	Print Name Clearly	
Title	Email Address	Phone

THE STATE OF MONTANA ANNUAL REPORT CAN BE FILED DIRECTLY WITH THE STATE FOR FREE.

©2026 C.P.S.

for office use only ND: 09/18/2026 CID [redacted]

Please Respond By 10/18/2026