



No. <b>W 143167</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 01/25/2016</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> RANDY ZDUONG 3424 N DUANE WAY BOISE ID 83713  1376 W. Chinden Blvd Meridian, ID 83646
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. NEW NAIL & SPA LLC RANDY ZDUONG <del>3424 N DUANE WAY</del> <sup>1376 W. Chinden Blvd</sup> <del>BOISE ID 83713</del> 1376 West Chinden Blvd Meridian ID, 83646		3. New Registered Agent Signature.  
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Randy Zduong 1376 W. Chinden Blvd, Meridian, ID 83646		
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold; font-size: large;">             IDAHO              W 143167           </div>		6. Signature:  Name (type or print): <u>Randy H Zduong</u> Date: <u>7-24-18</u> Title: <u>President</u>	

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM