



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

For Office Use Only
Return completed form to
Ida -**FILED**- state

Attn: Reinstatements
File #: 0004829704
450 North 4th Street
Date Filed: 7/22/2022 1:08:00 PM

Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 602778

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 04/16/2018

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

SALON SERENDIPITY LLC
2718 S ALMOND CT
NAMPA, ID 83686-4419

Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

LUCY A BREDE
2718 S ALMOND CT
NAMPA, ID 83686

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Lucy A. Brede	2718 S. Almond Ct.	Nampa, ID 83686
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

Lucy A Brede

(6) Date:

7/22/22

(7) Type/Print Name:

Lucy A. Brede

(8) Title:

Owner/Manager

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30.00.

Sign and date this form and return to the address provided above.

B0696-8657 07/22/2022 1:08 PM Received by ID Secretary of State Lawrence Denney