



Idaho Limited Liability Company Reinstatement Form For Office Use Only

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R-FILED and form to:

			Date Filed: 6/21/2022 1:40:00 PM Boise, ID 83720
	Reinstatement fee: \$	30.00.	Phone: (208) 334-2300
SOS Control Number: 157283		Filing Status: Inactive-Dissolved (Administrative)	
Limited Liability Company (D)		Date Formed: 03/14/2006	Formation Locale: ID
Name and Mai	_	(1) Add o	r Change Mailing Address:
CARPE DANZA, LLC NATALIE GALLEGOS		11.11	w Main st
1736 W MAIN			
BOISE, ID 83702-5129		501	3C, 1A 87 CA
	ent (RA) and Registered Offic	ce (RO) Address: (2) Chang	ge RA and/or RO Address:
NATALIE GALLEGOS 1736 W MAIN ST		141	w Main 5t
BOISE, ID 83702		Bolz	se, Fd 83702
	Note: The Registered C	Office address must be a physical Idaho a	addraga (na nastal boy)
(0) N	_	mice address must be a physical idano a	
(3) New Regist	tered Agent (RA) Signature:_	If a new agent is appointed in item (2) above	e. the new agent must sign here to accept the appointment
			Do NOT put 'same as last year' or 'same as above re space is needed, please add an attachment.
Manager/Member	Name	Business Address	City, State, Zip
Mgr Mem	Natalie Gallego.	5 140 W Main 3.	1
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Mgr Mem		· / / /	
(5) Signature:	Napelii Vol	(6) Date:	6/31/22
(7) Type/Print Nam	e: Natalie Galles	(8) Title:	6/21/22 /Mer
	gibly complete the form above. Enclos	e a check made payable to the Idaho Sed ed above	cretary of State for \$30.00.