



0005701847

**STATE OF IDAHO***Office of the secretary of state, Phil McGrane***REINSTATEMENT ANNUAL REPORT**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$30.00

*For Office Use Only***-FILED-**

File #: 0005701847

Date Filed: 4/23/2024 12:39:11 PM

Reinstatement Annual Report Form

Select one: Standard, Expedited or Same Day Service (see descriptions below) Expedited (+\$40; filing fee \$70)

Current Entity Name All Hands Vending LLC

The file number of this entity on the records of the Idaho Secretary of State is: 0003711647

Organized under the laws of: IDAHO

Entity Type: Limited Liability Company (D)

Entity Subtype:

Limited Liability Company Subtype Limited Liability Company

Limited Liability Company Name:

Limited Liability Company name All Hands Vending LLC

The registered agent on record is:

Registered Agent REGISTERED AGENTS INC
Commercial Registered Agent
Physical Address
784 S CLEARWATER LOOP STE R
POST FALLS, ID 83854
Mailing Address
784 S CLEARWATER LOOP STE R
POST FALLS, ID 83854

Agent or Address Change?

☒ Appoint new agent (address change not available).

The name and street address of the new registered agent and office in Idaho is:

Registered Agent Registered Agent
Daniel P. Willis
Physical Address:
657 S. 5000 W.
REXBURG, ID 83440
Mailing Address:
657 S 5000 W
REXBURG, ID 83440-3617

☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

The mailing address of the entity is:

657 S 5000 W
REXBURG, ID 83440-3617

The physical address of the entity is:

657 S 5000 W
REXBURG, ID 83440-3617

Limited Liability Company Managers and Members

Name	Title	Address
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<input checked="" type="checkbox"/> Daniel P. Willis Jr.	Member	657 S. 5000 W. REXBURG, ID 83440
<input checked="" type="checkbox"/> Theresa G. Willis	Member	657 S. 5000 W. REXBURG, ID 83440

The Application for Reinstatement must be signed by a governor.

Title: _____ Owner/Member _____

Daniel Paul Willis Jr. _____ *04/23/2024* _____

Sign Here _____ Date _____