



Idaho Limited Liability Company Reinstatement Form

File online at: sos.idaho.gov

Return completed form to:

Idaho Secretary of State
Attn: Reinstatements
450 North 4th Street
Boise, ID 83720
Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 450676

Filing Status: Inactive-Dissolved

Limited Liability Company (D)

Date Formed: 02/19/2015

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

SPORTSPERFECT LLC
PO BOX 3635
KETCHUM, ID 83340

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

(2) Change RA and/or RO Address:

JAMES HUNGELMANN
210 SKIWAY DR UNIT 3
KETCHUM, ID 83340

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 type="checkbox"/> Mgr <input type="checkbox"/> Mem	JAMES HUNGELMANN	PO 3635	KETCHUM ID 83340
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

(6) Date:

(7) Type/Print Name:

(8) Title:

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.

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