



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov Reinstatement fee: \$30.00.

Return completed form to: Idaho Secretary of State

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

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

For Office Use Only

B0846-6690

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File #: 0005522663

Date Filed: 12/19/2023 10:16:00 AM

SOS Control	Number: 4677089	Filing Status: Inactive	Filing Status: Inactive-Dissolved (Administrative)		
Limited Liability Company (D)		Date Formed: 03/30/2	2022 Form	ation Locale: ID	ω
Name and Ma			(1) Add or Change Mailing Address:		
Tobacciana, Ll ASH WHITWE	LL				6
1760 W WOO! BOISE, ID 837					AM I
Registered Ag Ashley E White 1760 WOODB BOISE, ID 837	RIDGE LANE	fice (RO) Address:	(2) Change RA an	d/or RO Address:	Received
	Note: The Registere	d Office address must be a	physical Idaho address	(no postal box).	λq
(3) New Regis	tered Agent (RA) Signature	:		agent must sign here to acce	Ppt the appointment.
(4) Limited Liabil These will not be	ity Companies: Enter names an accepted. Changes here will no	d addresses of Managers ot affect the entity mailing	OR Members. Do NO	F put 'same as last year' e is needed, please add	or 'same as above'. Q
Manager/Member	Name	Business Add	lress	City, State, Zip	
Mgr	Ashley whitwell Lisa Whitwell	-71 4 5 120	bridge lane abridge lane	BOISE ID	83706 st
Mgr Mem	Orion whitnell		abridge lave	Boise 10	83706 p
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(5) Signature:	Lisa Ulhhor	11	(6) Date: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-19-2023	tary
(7) Type/Print Nam	ne: Lisa Whitwel		(8) Title: M	anager	O H
Instructions: Le	gibly complete the form above. Enc	lose a check made payable	to the Idaho Secretary o	<i>∪</i> of State for \$30.00.	70