



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

For Office Use Only
 Return completed form to:
 Ida **-FILED-** itate
 Attn: Reinstatements
 File #: 0004798324
 430 North 4th Street
 Date Filed: 6/27/2022 1:57:00 PM
 Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 69292
 Limited Liability Company (D)

Filing Status: Inactive-Dissolved (Administrative)
Date Formed: 03/20/2002 **Formation Locale:** ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

E Z, LLC
 4780 W STATE ST
 BOISE, ID 83703-4104

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

(2) Change RA and/or RO Address:

MIKE ZEHNER
 4780 W STATE
 BOISE, ID 83703

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 checked="" type="checkbox"/> Mem	Mike Zehner	4780 W. State	Boise, ID 83703
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Lisa Zehner	4780 W. State	Boise, ID 83703
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(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.

B0719-1056 06/27/2022 1:57 PM Received by ID Secretary of State Lawrence Denney