



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 For Office Use Only

-FILED-

File #: 0006143400

Date Filed: 2/24/2025 2:11:00 PM

SOS Control Number: 542273 Filing Status: Inactive-Dissolved (Administrative) Limited Liability Company (D) Date Formed: 03/01/2017 Formation Locale: ID Name and Mailing Address: SPECTAGALS, L.L.C. 2003 HOWARD AVE CALDWELL, ID 83605-4873 Registered Agent (RA) and Registered Office (RO) Address: CHRISTINA ROCK 2003 HOWARD AVE CALDWELL, ID 83605 Note: The Registered Office address must be a physical Idaho address (no postal box). Note: The Registered Office address must be a physical Idaho address (no postal box). Note: The Registered Office address must be a physical Idaho address (no postal box). A new agent is appointed in item (2) above, the new agent must sign here to accept the appointment of the second of the						2
Limited Liability Company (D) Date Formed: 03/01/2017 Formation Locale: ID Name and Mailing Address: SPECTAGALS, L.L.C. 2003 HOWARD AVE CALDWELL, ID 83605-4873 Registered Agent (RA) and Registered Office (RO) Address: CHRISTINA ROCK 2003 HOWARD AVE CALDWELL, ID 83605 Note: The Registered Office address must be a physical Idaho address (no postal box). Note: The Registered Office address must be a physical Idaho address (no postal box). 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 of the second process of t	SOS Control Number: 542273		Filing Status: Inactive-Dissolved (Administrative)			225
Name and Mailing Address: SPECTAGALS, L.L.C. 2003 HOWARD AVE CALDWELL, ID 83605-4873 Registered Agent (RA) and Registered Office (RO) Address: CHRISTINA ROCK 2003 HOWARD AVE CALDWELL, ID 83605 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 of the second in item (2) above, the new agent must sign here to accept the appointment of the second in item (2) above, the new agent must sign here to accept the appointment of the second in item (2) above, the new agent must sign here to accept the appointment of the second in item (2) above, the new agent must sign here to accept the appointment of the second in item (3) above, the new agent must sign here to accept the appointment of the second in item (3) above. The new agent must sign here to accept the appointment of the second in item (3) above. The new agent must sign here to accept the appointment of the second in item (3) above. The new agent must sign here to accept the appointment of the appointment o	Limited Liability Company (D)		Date Formed: 03/01/20	017 Format	ion Locale: ID	
Registered Agent (RA) and Registered Office (RO) Address: CHRISTINA ROCK 2003 HOWARD AVE CALDWELL, ID 83605 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). These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment. Of the space of the appointment of the accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment. Of the space of the appointment of the accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment. Of the space of the appointment of the appointment of the appointment of the accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment. Of the appointment of the appoin	SPECTAGALS, L.L.C.			(1) Add or Change N	failing Address:	—— ——
Registered Agent (RA) and Registered Office (RO) Address: CHRISTINA ROCK 2003 HOWARD AVE CALDWELL, ID 83605 Note: The Registered Office address must be a physical Idaho address (no postal box). (3) New Registered Agent (RA) Signature:						PM
Registered Agent (RA) and Registered Office (RO) Address: CHRISTINA ROCK 2003 HOWARD AVE CALDWELL, ID 83605 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 appointments of the sew ill 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 Mgr Mem Mgr Mgr Mem Mgr				e e e	transmission to the same of th	
(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 in item (3) above, the new agent must sign here to accept the appointment in item (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 Manager/Mem Man	CHRISTINA R	OCK D AVE	ffice (RO) Address:	(2) Change RA and/	or RO Address:	eived b
Manager/Member Name Manager/Member Name Business Address City, State, Zip Manager/Member Manage	(4) Limited Liabil	tered Agent (RA) Signature	If a new agent is appointed	in item (2) above, the new a	gent must sign here to accept the ap	e as abo v e'.
Mgr Mem	Manager/Member	Name	Business Addı	ress	City, State, Zip	-
(5) Signature: (6) Date: 2/24/2025	Mgr	Christina Rock	2003 Ho	ward Ave	Caldwell, TD	Idaho Secre
		Saile D		(6) Date: 7	4/2025	tary
		ne: Christina	Rock		7	О Н

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.