



Idaho Limited Liability Company Reinstatement Form

For Office Use Only

File online at: sosbiz.idaho.gov

Re **-FILED-** d form to:

Id: State

File #: 0004986777 atements

Date Filed: 11/7/2022 11:19:00 AM

Boise, ID 83720

Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 332165

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 10/20/2011

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

EXTREME PET GROOMING SALON. LLC.

SANDY

1513 S FIVE MILE RD

BOISE, ID 83709-1374

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

(2) Change RA and/or RO Address:

SANDY CARROLL

1513 S FIVE MILE RD

BOISE, ID 83709

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 checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Sandy Carroll	1513 S Five mile Rd.	Boise Id 83709
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

Sandy Carroll

(6) Date:

11-7-22

(7) Type/Print Name:

Sandy Carroll

(8) Title:

Owner/Mgr

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.

B0736-6808 11/07/2022 11:19 AM Received by Office of the Idaho Secretary of State