No. W 87851	Reinstatement Annual Report Form ADMIN DISSOLVED 01/22/2018	2. Registered Agent and Office (NOT A P.O. BOX) SHERRY FERNANDEZ	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Mailing Address: Correct in this box if needed.  FIT MANIA LLC SHERRY FERNANDEZ 2404 ORCHARD ST 300	2404 ORCHARD ST 300 BOISE ID 83705-8371	
REINSTATEMENT FEE	BOISE ID 83705	3. <u>New</u> Registered Agent Signature.	
4. Limited Liability  Manager or Member	Companies: Enter Names and Addresses of Manage Name Street or PO Address City		
	*	ID USA 83705	
Manager Member 🗌	#1300		
Manager  Member			
Manager Member			
5. Organized Under the La		Date:	
IDAHO	Signature:	1 24/18	
W 87851	Name (type or print): Sherry Fernandez	Title: OWNEN	
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