



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form to:

Idaho Secretary of State

Attn: Reinstatements

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 3572515

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 07/18/2019

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

Ask And You Shall Receive LLC

CRYSTAL GARZA

9220 W HEARTHSIDE DR

BOISE, ID 83709-4994

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

(2) Change RA and/or RO Address:

Crystal G Garza

9220 W HEARTHSIDE DR

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	Eric Garza	9220 W Heartside Dr.	Boise, ID 83709
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Crystal Garza	9220 W Heartside Dr	"
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(5) Signature:

Crystal Garza

(6) Date:

11/16/21

(7) Type/Print Name:

Crystal Garza

(8) Title:

~~Owner~~ Manager

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.

B0652-5601 11/16/2021 4:20 PM Received by ID Secretary of State Lawrence Denney