



Idaho Limited Liability Company Reinstatement Form

File online at: sos.idaho.gov

Return completed form to:

Idaho Secretary of State Attn: Reinstatements 450 North 4th Street

Reinstatement fee: \$30.00.			Boise, ID 83720 Phone: (208) 334-2300
SOŞ Control Number: 349617		Filing Status: Inactive-Dissolved	· · · · · · · · · · · · · · · · · · ·
Limited Liability	Company (D)	Date Formed: 05/04/2012	Formation Locale: ID
Name and Mai AMERICAN UN 3839 W. PRAIF HAYDEN, ID 8	IIVERSAL STORAGE LLC RIE AVE.	(1) Ad	ld or Change Mailing Address:
ANTHONY P V	T HAYDEN DR E, ID 83835	office (RO) Address: (2) Ch	nange RA and/or RO Address: ho address (no postal box).
(4) Limited Liabili		If a new agent is appointed in item (2: a and addresses of Managers OR Member	ove the lew agent must seen filtre to a coept the appointment rs. Do NOT put 'same as last year' or 'same as above' more space is needed, please add an attachment.
Manager/Member	Name	Business Address	City, State, Zip
Mgr X Mem	ANTHONY P VILLEU	U JORIS POINT HUYDE	
Mgr ⊠Mem	JEFF HANNA	712 S. 12+H ST.	COSUR & ALGUE, ID 83815
Mgr ⊠Mem	ROS MCWILLIAMS	SOIN, RIVERPOIN	IT BLUD #4M SPOKANE IDIA 99207
Mgr Mem			
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MgrMem			
Mgr Mem			
Mgr Mem			
(5) Signature:	Di	(6) Da	ate: 9/10/19
(7) Type/Print Name: ANTHONY P. VILLELLI			ile: MEMBEIL
	gibly complete the form above. End	close a check made payable to the Idaho	Secretary of State for \$30.00.