



## Idaho Limited Liability Company Reinstatement Form For Office Use Only

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Reinstatement fee: \$30.00.  Reinstatement fee: \$30.00.  Phone: (208) 334-23					R	
SOS Control N	Jumbor: 3336731	Filing Status: Inactive	Dissolved (Administr	ative)	n e	
		Date Formed: 10/18/20	ng Status: Inactive-Dissolved (Administr		No. 1 and 1	
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3528 HAWTHO	AT AND AUTO UPHOLSTER	Y L.L.C.	(1) Add or Change N	Mailing Address:	e R R	
Registered Ag WAYNE ROSE 3528 HAWTHO POCATELLO,	DRNE RD	ffice (RO) Address:	(2) Change RA and/	or RO Address:		
	Note: The Registered tered Agent (RA) Signature	If a new agent is appointed	n item (2) above, the new a	gent must sign here to accept i	the appointment	
These will not be	accepted. Changes here will no	ot affect the entity mailing ad	dress. If more space i	s needed, please add an		
Manager/Member	Name	Business Addre		City, State, Zip		
Mgr Mem	WAYNE ROSEN	to 1018	Flands	Poc. ID.	# 3201 H	
(5) Signature:	Wayn Ru		(6) Date: 1/2	3/23	et Mi Fi	
(7) Type/Print Nam	gibly complete the form above. Enc	956M	(8) Title: (3)	Ver	<u>n</u>	

Sign and date this form and return to the address provided above.