



# Idaho Limited Liability Company Reinstatement Form

File online at: [sosbiz.idaho.gov](http://sosbiz.idaho.gov)

For Office Use Only

Retu **-FILED-** form to:

Idaho Secretary of State  
File #: 0005246646  
Reinstatements

Date Filed: 5/12/2023 9:59:00 AM

Boise, ID 83720

Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 4102628

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 12/17/2020

Formation Locale: ID

## Name and Mailing Address:

Ridgeline Decor LLC  
5297 TREYDEN DR  
AMMON, ID 83406

(1) Add or Change Mailing Address:

670 W Riverview dr.  
Idaho Falls, ID 83401

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

Brandon C Bluemel  
5297 TREYDEN DR  
AMMON, ID 83406

(2) Change RA and/or RO Address:

Brandon Hill  
670 W Riverview dr.  
Idaho Falls, ID 83401

Note: The Registered Office address must be a physical Idaho address (no postal box).

## (3) New Registered Agent (RA) Signature:

*Brandon Hill*

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 checked="" type="checkbox"/> Mem	Brandon Hill	670 W Riverview dr.	Idaho Falls, ID, 83401
<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			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

*Brandon C Bluemel*

(6) Date:

5-8-2023

(7) Type/Print Name:

BRANDON BLUEMEL

(8) Title:

PREVIOUS 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.

B0787-7453 05/12/2023 9:59 AM Received by Office of the Idaho Secretary of State