



# Idaho Limited Liability Company Reinstatement Form

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For Office Use Only

Re: **-FILED-** 1 form to

Id: State

File #: 0004674248 items

Date Filed: 3/10/2022 1:51:00 PM

Boise, ID 83720

Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 4072089

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 11/20/2020

Formation Locale: ID

## Name and Mailing Address:

(1) Add or Change Mailing Address:

Alaskan Nights Fleece Blankets, LLC  
PO BOX 745  
NEW PLYMOUTH, ID 83655-0745

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

(2) Change RA and/or RO Address:

Lora M Shallenberger  
4789 BLAINE RD  
NEW PLYMOUTH, ID 83655

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 last year'. 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	Lora M Shallenberger	P.O. Box 745	New Plymouth, Id 83655
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: Lora M Shallenberger

(6) Date: 3.28.22

(7) Type/Print Name: Lora M Shallenberger

(8) Title: Manager/Owner

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.

B0685-1664 03/10/2022 1:51 PM Received by ID Secretary of State Lawrence Denney