



Idaho Limited Liability Company Reinstatement Fφrm

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	Reinstatemen	t fee: \$30.00.	\neg	Boise, ID 83720	
	****			Phone: (208) 334-2300	
SOS Control Number: 524977 Fi		Filing Status: Inactive-Dis	Filing Status: Inactive-Dissolved (Administrative)		
Limited Liability Company (D)		Date Formed: 10/20/2016	Format	Formation Locale: ID	
Name and Mai	iling Address:		(1) Add or Change Mailing Address:		
STAR NAILS LLC			STAR NAILS LLC		
STE C			450 STE C THAIN RD		
450 THAIN RD			Lewiston, ID 83501		
LEWISTON, IC	7 83501-5300		D 011131117, D		AM
Registered Ag	ent (RA) and Register	ed Office (RO) Address:	(2) Change RA and		77 00
THUY TRANG	THI NGO		VU HOAI TRAN		Õ
2704 17TH ST			3805 147H ST E		Ľ,
LEWISTON, IE	83501		Lewiston, 20 83501		ived
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	Note: The Reg	istered Office address must be a physi	ical Idaho address (r	no postal box).	Λq
(3) New Regis	tered Agent (RA) Signa	ature:			~
		# a new agent is appointed in it.	em (2) above, the new a	agent must sign here to accept the appointme	
(4) Limited Liabili	ty Companies: Enter nam	es and addresses of Managers OR M	Members. Do NOT	put 'same as last year' or 'same as al	H₁ √elvod
These will not be accepted. Changes here will not a					t. <u>Q</u>
Manager/Member	Name	Business Address		City, State, Zip	-
Mgr Mem	Vu Hoa: Tran	450 C Thain f	रव /	Lewiston, ID, 83501	Н,
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(5) Signature:	14 / V /		(6) Date: 4	5-12	cretary
			(8) Title: Owner		7
(7) Type/Print Name: Thuy Trang Thi Ngo			(o) Title. (W)(/		
Instructions: Le	gibly complete the form above	e. Enclose a check made payable to th	e Idaho Secretary of	State for \$30.00.	0 Hi

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