



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov Reinstatement fee: \$30.00.

Return completed form to:

Idaho Secretary of State

Attn: Reinstatements

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

For Office Use Only

-FILED-

File #: 0005952185

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Limited Liability Company (D)

Date Formed: 05/12/2021

Formation Locale: ID

Name and Mailing Address:

Pam's Party Jumpers LLC

1130 NW SMITH DR

MOUNTAIN HOME, ID 83647-5789

(1) Add or Change Mailing Address:

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

NANCY P IBARRA

1130 NW SMITH ST

MOUNTAIN HOME, ID 83647

(2) Change RA and/or RO Address:

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 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 type="checkbox"/> Mem	Nancy Pamela Ibarra Tallavas	1130 NW Smith St	Mountain Home ID 83647
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Miguel Angel Ontiveros catano	1130 NW Smith St	Mountain Home ID 83647
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(5) Signature: Nancy Pamela Ibarra Tallavas (6) Date: 10/23/24

(7) Type/Print Name: Nancy Pamela Ibarra Tallavas (8) Title: 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.