


No. W 128539	Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014		2. Registered Agent and Office (NOT A P.O. BOX) JAMES BATES 354 N-2200-E ST ANTHONY ID 83445 2591 E Yellowstone Hwy #1 St. Anthony, ID 83445							
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. UNCLE JIMS GROOMING LLC. 354 N-2200-E ST ANTHONY ID 83445 2591 E Yellowstone Hwy #1 St. Anthony, ID 83445		3. New Registered Agent Signature.							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.										
<table border="0" style="width: 100%;"> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code				
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/> Manager <input type="checkbox"/> Member <input type="checkbox"/> Manager <input type="checkbox"/> Member <input type="checkbox"/> Manager <input type="checkbox"/> Member <input type="checkbox"/>	James Bates 2591 E. Yellowstone Hwy #1 St. Anthony ID 83445			#1 St. Anthony ID 83445						
5. Organized Under the Laws of: <div style="text-align: center; font-size: large;"> IDAHO W 128539 </div>		6. Signature:  <hr/> Name (type or print): <u>James Bates</u> <hr/> <div style="display: flex; justify-content: space-between;"> <div> Date: <u>1-17-18</u> </div> <div> Title: <u>Owner/manager</u> </div> </div>								
Issued 01/15/2018 by online										