



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form to:

Idaho Secretary of State
Attn: Reinstatements
450 North 4th Street
Boise, ID 83720
Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 623313

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 08/29/2018

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

AURA THERAPEUTIC MASSAGE, LLC
STE 125
3043 S MERIDIAN RD
MERIDIAN, ID 83642-7967

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

(2) Change RA and/or RO Address:

RICHARD A ENNIS
3043 S MERIDIAN RD STE 125
MERIDIAN, ID 83642-7967

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 type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Richard A. Ennis	3043 S Meridian Rd. Ste 125	Meridian, ID 83642
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

(6) Date:

(7) Type/Print Name:

(8) Title:

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.

B0657-3256 11/30/2021 4:58 PM Received by ID Secretary of State Lawrence Denney