



## Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form to:
Ida -FILED - State

Attn: Reinstatements File #: 0004917478 400 Norm 4m Street

Date Filed: 9/15/2022 3:43:00 PM

	Reinstatement fee	: \$30.00.		Phone: (208) 334-2300	
				Filone. (200) 334-2300	
SOS Control Number: 424857		Filing Status: Inactive-Dissolved (Administrative)			
Limited Liability Company (D)		Date Formed: 06/23/2014	4 Formation	Locale: ID	
Name and Mai SHOP NO 7 M/ 111 W 43RD S BOISE, ID 837	ARINE LLC T		(1) Add or Change Mail	ing Address:	
Registered Ag JOHN A HEAR 111 W 43RD S GARDEN CITY	T , ID 83714	ffice (RO) Address: ed Office address must be a phys	(2) Change RA and/or I		
(4) Limited Liabilit	tered Agent (RA) Signature ty Companies: Enter names ar accepted. Changes here will n	If a new agent is appointed in and addresses of Managers OR	item (2) above the new agen  Members. Do NOT put	t must sign here to accept the appointment.  'same as last year' or 'same as above eeded, please add an attachment.	
Manager/Member	Name	Business Addres	ş	City, State, Zip	
Mgr ☐ Mem	Devin 5 Rush	- 111 W 433	st	Roise ID 83719	
☑Mgr ☐Mem	John A Hearn	e 111 W 430	d St	Baise ID 83714	
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(5) Signature:			(6) Date: 9 / 15	/22	
(7) Type/Print Name: Devil Rush			(8) Title: Man		
Instructions: Los	ribly complete the form above. En	alaaa a ahaak mada nayabla ta th	na Idaha Saaratany of Sta	* for \$20.00	

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.