



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 #: 0006203188

Date Filed: 3/31/2025 11:42:00 AM

SOS Control Number: 3742553

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 01/09/2020

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

Shoemaker Ag, LLC
JOYCE SHOEMAKER
24 S 200 E
BLACKFOOT, ID 83221-5983

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

(2) Change RA and/or RO Address:

Joyce Shoemaker
24 S 200 E
BLACKFOOT, ID 83221-5983

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

Joyce Shoemaker
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	Joyce Shoemaker	24 South 200 East	Blackfoot ID 83221
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature:

Joyce Shoemaker

(6) Date:

3/28/2025

(7) Type/Print Name:

Joyce Shoemaker

(8) Title:

Owner/Manager

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.

B0984-8927 03/31/2025 11:42 AM Received by Office of the Idaho Secretary of State