The Domestic LLC was dissolved by operation of law on 6/21/2023.

Reinstatement Requires:

- 1. Completed Biennial Report Form
- 2. Completed Reinstatement Form
- 3. Total Fee as Stated Below

Please return this form with remittance

	Year	Biennial Fee	Late Fee
	2023	\$30	\$ O
	2025	\$30	\$0
	Subtotals:	\$60	\$0
_	 		

Total Biennial Fees: \$60 Total Late Fees: \$0 Reinstatement Fee: \$30

Total: \$90

APPLICATION AND DECLARATION OF REINSTATEMENT DOMESTIC LIMITED LIABILITY COMPANY

Nebraska Secretary of State ◆ Robert B. Evnen 1201 N Street, Suite 120 • Lincoln, NE 68508 P.O. Box 94608 • Lincoln, NE 68509 (402) 471-4079 http://www.sos.ne.gov

Name of Limited Liability Company								
The company was dissolved by the Secretary of State onJune 21, 2023, for: Date								
_x_A. Failure to file biennia	l reportB. Nonpayment of fees							
C. Other Please state reason								
The above-named grounds for dissolution either did not exist or have been eliminated and the company's name satisfies the requirements of Neb. Rev. Stat. § 21-108.								
Date	Signature of Authorized Representative							
	Printed Name of Authorized Representative							
FILING FEE: \$30.00								
DECLARATION OF REINSTATEMENT								
I, ROBERT B. EVNEN, Secretary of State, have determined that the above Application for Reinstatement contains the required information, and that the information is correct. I do hereby reinstate the above-named Limited Liability Company as a company in good standing to do business in the State of Nebraska, and further state that the grounds for dissolution of the company did not exist or have been eliminated.								
IN TESTIMONY WHEREOF, I do hereby affix the Great Seal of the State of Nebraska.								
(State Seal)	_Nobert Serven_							

Neb. Rev. Stat. § 21-152

Revised May 2023

DOMESTIC LIMITED LIABILITY COMPANY BIENNIAL REPORT 2025 - 2026

Secretary of State 1201 N Street, Suite 120, Lincoln, NE 68508 P.O. Box 94608 Lincoln, NE 68509 (402) 471-4079

This report must be filed between January 1 and April 1, 2025.

The address of principal office must be completed if blank and may be updated on this report. Other changes to this form must be filed separately. Please see the instructions.

1. Name of Limited Liability Company									
2 Street and mailing addr	ess of designated office								
2. Succe and maning address	Street Ac	ldress							
		NE							
City		State		ZIP					
3. Street and mailing addre	ess of principal office Street Address								
City		State		ZIP					
4. Name and Street Addre	ess of Agent for Service of Process								
Street Address and post of	fice how number (if any)	City		_NE ZIP					
Succe Address and post of	nce box number (if any)		City	ZII					
Signature	Printed Name	Title		Date					

PAPER FILING FEE: \$30.00 Make checks payable to: Secretary of State

DOMESTIC LIMITED LIABILITY COMPANY BIENNIAL REPORT 2025 - 2026

Secretary of State 1201 N Street, Suite 120, P.O. Box 94608 Lincoln, NE 68509 (402) 471 - 4079 sos.nebraska.gov

Please note that failure to file the completed report and pay the required fee will result in the dissolution of the limited liability company.

INSTRUCTIONS

- 1. The report is blank and must be filled in with the latest information on record; changes may only be made to line 3 per below.
- 2. **Complete line 3**. Principal office is the principal executive office where the company does business regardless of location. Neb. Rev. Stat. § 21-102(17). The principal office address must be completed even if the address is the same as your designated office address.
- 3. Sign and date the report. The report must be signed by a person authorized by the company.
- 4. The Biennial Filing fee is \$30.00, and the Reinstatement Fee is \$30.00 for a total of \$60.00 due. Make check payable to "Secretary of State". Make a copy of the completed form and retain it for your records.
- 5. Changes to items 1, 2 and/or 4 require additional forms and filing fees:
 - a. Changes to the name of the limited liability company must be accomplished by filing an Amended Certificate of Organization form.
 - b. Changes to the name and/or address of the agent for service of process, and/or the address of the designated office must be accomplished by filing a Statement of Change of Designated Office/Agent form (Designated office is the office designated and continuously maintained in Nebraska). Both forms may be found at:

 www.sos.nebraska.gov/business-services/forms-and-fee-information
- 6. Mail the completed forms and fee to: Secretary of State, Business Services, P.O. Box 94608 Lincoln, NE 68509. This cannot be filed online.