



# Idaho Limited Liability Company Reinstatement Form

File online at: [sosbiz.idaho.gov](http://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-**

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Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 12/31/2003

Formation Locale: ID

**Name and Mailing Address:**

(1) Add or Change Mailing Address:

KOBE, LLC  
732 N SANTA PAULA PL  
BOISE, ID 83712-6527

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

(2) Change RA and/or RO Address:

DOUG TAMURA  
732 N SANTA PAULA PL  
BOISE, ID 83712

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	DOUG TAMURA	P.O. BOX 8001	BOISE, ID 83707
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

(6) Date:

6/26/24

(7) Type/Print Name:

DOUG TAMURA

(8) Title:

MEMBER

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.

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