



Idaho Limited Liability Company Reinstatement Form

File online at: sos.idaho.gov

Return completed form to:

Idaho Secretary of State Attn: Reinstatements 450 North 4th Street

Reinstatement fee: \$30.00.			Boise, ID 83720 Phone: (208) 334-2300	. 07
•		ing Status: Inactive-Dissolv	ed Formation Locale: ID	2019
Name and Mai BEARD FAMIL 140 W 10000 N TETONIA, ID 8	Y INVESTMENTS, LLC.	(1) .	Add or Change Mailing Address:	11:39 AM
DAVID WAYNE 140 W 10000 N TETONIA, ID 8	Note: The Registered Offi	(RO) Address: (2)	Change RA and/or RO Address: Jaho address (no postal box).	Received by
(3) New Regist	tered Agent (RA) Signature:	If a new agent is appointed in item (2)	above, the new agent must sign here to accept the appoin	ntment. H
(4) Limited Liabili These will not be	ty Companies: Enter names and add accepted. Changes here will not affo	dresses of Managers OR Members the entity mailing address.	pers. Do NOT put 'same as last year' or 'same as If more space is needed, please add an attachm	ient.
Manager/Member	Name	Business Address	City, State, Zip	9
☑ Mgr Mem ☑ Mgr ☑ Mem	Jerine Beard Candy Blaser Jense Beard Stacy Beard Margaret Beard Deneme Waller Omichael W Beard Milye Beard	140W 100 5777W 5, 862 W 91 1303 N 36 1503 N 21	000 M Jelowi Id 8: 000 M Reflung gal 00 M Jelowid, Id 50 E ashton, Id 8: 00 W APT 101 St Leongeut 0 N Jelowie Id 8: 0 M Jelowie Jd 8:	8345 8345 8345 8345 8414 8345 8345 8345
(5) Signature:	David W B		Date: 6/5/19	awere
(7) Type/Print Nam	e: David w B	eard (8)	Title: Manager	
	jibly complete the form above. Enclose a form and return to the address provided		no Secretary of State for \$30.00.	- <u>Q</u>