



Idaho Limited Liability Company Reinstatement Form

Return completed form to:

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Idaho Limited Liability Company Reinstatemer File online at: sos.idaho.gov Reinstatement fee: \$30.00.				ent Form	Return completed form to: Idaho Secretary of State	
				Attn: Reinstatements 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300		09/26/
SOS Control N	umber: 280773	Filing Status: I	nactive-Dissolved			N 2
Limited Liability	Company (D)	Date Formed: (02/04/2010	Formation L	.ocale: ID	19
Name and Mail THOMAS HEAT 2118 OVERLAN BOISE, ID 8370	TING AND COOLING, LLC		(1) Add or Change Mailing Address:			
Registered Agent (RA) and Registered Office (RO) Address: THOMAS NGUYEN 2118 OVERLAND RD BOISE, ID 83705 (2) Change RA and/or RO Address: (2) Change RA and/or RO Address:						Received
	ered Agent (RA) Signature	If a new agent is	······································	e, the new agent r	stal box). must sign here to accept the appointmentage as last year or 'same as at	
These will not be accepted. Changes here will not affect the entity mailing address. If more space is his				re space is nee	eded, please add an attachment	Ğ
Manager/Member			ss Address		City, State, Zip	M)
Mgr	Thomas Newy	6N X/1		Const fl	Boise, ID, 837	STEP ATE
Mgr Mem						ate
MgrMem MgrMem						Hawer
(5) Signature: (6) Date: 09-23-19						
(5) Signature: (6) Date: $OG - 23 - 19$ (7) Type/Print Name: Thomas NEWYEN (8) Title: (8) Title:						

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.