



## **Idaho Corporation Reinstatement Form**

File online at: sos.idaho.gov

## Return completed form to 1

Idaho Secretary of State Attn: Reinstatements 450 North 4th Street Boise, ID 83720

Reinstatement fee: \$30.00.				450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 563135		Filing Status: Inactive-	Dissolved		2
General Business Corporation (D)		Date Formed: 03/01/20	)10 Forn	nation Locale: ID	19
Name and Ma WRAP WORI 4546 CHINDE BOISE, ID 83	ĒΝ		(1) Add or Chan	ge Mailing Address:	10:11 2
Registered A CASEY CLAII 4546 CHINDE BOISE, ID 83	R EN	ered Office (RO) Address:	(2) Change RA a	and/or RO Address:	AM Received
(3) New Regi	Note: The Restered Agent (RA) Sig	egistered Office address must be a ph  nature:  If a new agent is appointed i		s (no postal box).  ew agent must sign here to accept the appo	다 당 Dintmen
(4) Corporations:	Enter names and business	addresses (with zip code) of the Preside	nt, Vice President, Se	ecretary, Treasurer.	Ñ
Title	Name	Business Address		City, State, Zip	<u>.</u>
President	+ Casey Clair	- 4546 Chinder	Blud.	GALDEN CIFY, IDAY	<i>to §</i> हे7।⁴ <b>t</b> <b>प्र</b> <b>प्र</b>
(5) Board of Dire	ctors names and business ac	dress (with zip code). Attach additional	sheet if necessary.		0
Name		Business Address		City, State, Zip	T Start
					9Wellende
(5) Signature:	( less		(6) Date:	9/27/19 President	U
(7) Type/Print Na	me: (ase	Clair	(8) Title:	resident	enr