



# Idaho Limited Liability Company Reinstatement Form

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

Return completed form to:

Idaho Secretary of State  
Attn: Reinstatements  
450 North 4th Street  
Boise, ID 83720  
Phone: (208) 334-2300

**Reinstatement fee: \$30.00.**

SOS Control Number: 12417

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 12/15/1995

Formation Locale: ID

**Name and Mailing Address:**

(1) Add or Change Mailing Address:

MURPHY LAKESHORE DEVELOPMENT, L.L.C.  
3337 S LANDS END RD  
COEUR D ALENE, ID 83814-7790

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

(2) Change RA and/or RO Address:

ANNE ALSAKER  
7186 W BEN POINTE RD  
WORLEY, ID 83876

*JAMES H BURNS. RA  
3337 S. LANDS END RD  
COEUR D'ALENE ID 83814*

Note: The Registered Office address must be a physical Idaho address (no postal box).

**(3) New Registered Agent (RA) Signature:**

*James H Burns*

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 checked="" type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	JAMES H BURNS	3337 S. LANDS END RD	COEUR D'ALENE ID 83814
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature: *James H Burns*

(6) Date: *20 April 20*

(7) Type/Print Name: *JAMES H BURNS*

(8) Title: *Mgr. & RA*

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.

B0494-3768 04/22/2020 9:47 AM Received by ID Secretary of State Lawrence Denney