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# 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-**

File #: 0005956470

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Limited Liability Company (D)

Date Formed: 08/06/2018

Formation Locale: ID

## Name and Mailing Address:

LAJ4 NORTHWEST LLC  
2831 W TIMBER DR  
EAGLE, ID 83616-4665

(1) Add or Change Mailing Address:

ADALLC  
1707 N. 13th ID 83702  
BOISE  
Changed to:

Name LAJ4 NORTHWEST LLC

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

ANY LAJOCIES  
2831 W TIMBER DR  
EAGLE, ID 83616

(2) Change RA and/or RO Address:

Amy Graham  
1707 N. 13th  
BOISE, ID 83702

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

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

*Amy Graham*  
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 type="checkbox"/> Mem | Amy Michelle | 164 E State      | Eagle, ID 83616  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            | Graham       | Street           |                  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |              |                  |                  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |              |                  |                  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |              |                  |                  |
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| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |              |                  |                  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |              |                  |                  |

(5) Signature:

*Amy LaJocies (Graham)*

(6) Date:

10/29/24

(7) Type/Print Name:

Amy LaJocies

(8) Title:

Mgr.

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.

B0932-9571 10/29/2024 1:08 PM Received by Office of Idaho Secretary of State

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