



Idaho Limited Liability Company Reinstatement Form For Office Use Only

File online at: sosbiz.idaho.gov Reinstatement fee: \$30.00.

-FILED-

Date Filed: 7/6/2023 1:32:00 PM

Return completed form to:

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

Sign and date this form and return to the address provided above.

File #: 0005316604

se, ID 83720

		Phone: (208) 334-2300				20
SOS Control Number: 4662660			Filing Status: Inactive-Dissolved (Administrative)			123
Limited Liability Company (D)			Date Formed: 03/16/202	22 Format	tion Locale: ID	<u> </u>
Name and Mailing Address: HANDYMAN ECR L.L.C 707 W IDAHO AVE HOMEDALE, ID 83628-3348			(1) Add or Change Mailing Address:			:32 PM Re
Registered Agent (RA) and Registered Office (RO) Address: ELECTERIO COLUNGA 707 W IDAHO AVE HOMEDALE, ID 83628						ceived by
(4) Lim	nited Liabil	tered Agent (RA) Signatu	If a new agent is appointed in and addresses of Managers OF	atem (2) above, the new a	gent must sign here to accept the apout 'same as last year' or 'sam	OHH H Depointment.
Manager/Member Name			not affect the entity mailing address. If more space Business Address		City, State, Zip	
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Instru	ictions: Le	gibly complete the form above. F	nclose a check made payable to	the Idaho Secretary of	State for \$30.00.	d d