



Idaho Corporation Reinstatement Form

File online at: sos.idaho.gov

Return completed form to:

Idaho Secretary of State

				Attn: Reinstatements 450 North 4th Street	Ó
Reinstatement fee: \$30.00.				Boise, ID 83720 Phone: (208) 334-2300	
SOS Control I	Number: 503502	Filing Status: Inactive-	Dissolved	. ,	
General Busin	ess Corporation (D)	Date Formed: 03/30/20	06 Fo	ormation Locale: ID	L
Name and Mailing Address:			(1) Add or Ch	ange Mailing Address:	
B&S FARMS, 1721 E 500 N	INC.				5 -
ST ANTHONY	. ID 83445				ú
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		ed Office (NO) Address.	(2) Change H	A and/or RU Address:	(i
BRYAN LARS 1721 E 500 N	ON				ñ
SAINT ANTHONY, ID 83445					, ,
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	Makes The Dee	internal Office address moved by a mile	والمراجع والمراجع المراجع والمراجع		Ď
		istered Office address must be a pl	ysicai idano addi	ess (no postal box).	
(3) New Regis	stered Agent (RA) Sign	ature: If a new agent is appointed in	n item (2) above, the	a new agent must sign here to accept the appointme	ent. E
(4) Corporations:	Enter names and business a	ddresses (with zip code) of the Preside	••		Ų
Title	Name	Business Address	•	City, State, Zip	<u>_</u>
DRESIDENT	BRYAN LARS	ON 1721 E 500	N	SAINT ANDTHONY ID 831	445a
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(5) Board of Direct	ctors names and business add	Iress (with zip code). Attach additional	sneet if necessary	/.	C
Name Bu		Business Address	· · · · · · · · · · · · · · · · · · ·	City, State, Zip	
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(6) Signature:	1	2	(6) Date:	=-14-19	
(5) Signature:	Brysn XN		(U) Date.)	<u> </u>
(7) Type/Print Nar	ne: BRYAN L	ARSON	(8) Title:	RESIDENT/REGISTERE	<u> </u>
				Act. NT	— g

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.

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