







## STATE OF IDAHO

Office of the secretary of state, Lawerence Denney REINSTATEMENT ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$30.00 - Make Checks Payable to Secretary of State

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-FILED-

File #: 0003625083

Date Filed: 9/19/2019 12:05:24 PM

| Reinstatement Annual Report Form Select one: Standard, Expedited or               | r Same Day Service (see             | Standard (filing fee \$30)                    |
|---|-------------------------------------|---|
| descriptions below)   |                                     |   |
| Current Entity Name   |                                     | TAVACI-UPPER VALLEY IDAHO LLC                 |
| The file number of this entity on the records of the Idaho Secretary of State is: |                                     | etary 0000533897                              |
| Organized under the laws of:  |                                     | IDAHO   |
| Entity Type:  |                                     | Limited Liability Company (D)                 |
| Entity Subtype:   |                                     |   |
| Limited Liability Company Subtype   |                                     | Limited Liability Company                     |
| Entity Name:  |                                     |   |
| Entity name   |                                     | TAVACI-UPPER VALLEY IDAHO LLC                 |
| The registered agent on record is:  |                                     |   |
| Registered Agent  |                                     | JILL BRANCH<br>Registered Agent               |
|   |                                     | Physical Address                              |
|   |                                     | 2058 WEST 6450 SOUTH ##B                      |
|   |                                     | REXBURG, ID 83440                             |
|   |                                     | Mailing Address                               |
| The name and street address of the new regist                                     | tered agent and office in Idaho is: |   |
|   | _                                   |   |
| ✓ I affirm that the registered ager   | it appointed has consented          | to serve as registered agent for this entity. |
| The mailing address of the corporation is:  |                                     |   |
| 2058 W 6450 S # B   |                                     |   |
| REXBURG, ID 83440-4410  |                                     |   |
| Limited Liability Company Managers and Mem  | bers                                |   |
| Name  | Title                               | Address                                       |
| JILL BRANCH   |                                     | 2058 WEST 6450 SOUTH #B<br>REXBURG, ID 83440  |
|   |                                     |   |
| The Application for Reinstatement must be sig                                     | ned by at least one governor.       |   |
| Jill Branch   |                                     | 09/19/2019                                    |
| Sign Here   |                                     | Date  |
|   |                                     |   |
| Signer's Title:   |                                     | Manager                                       |
|   |                                     |   |