



# Idaho Limited Liability Company Reinstatement Form

File online at: [sos.idaho.gov](http://sos.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: 228222

Filing Status: Inactive-Dissolved

Limited Liability Company (D)

Date Formed: 03/21/2008

Formation Locale: ID

**Name and Mailing Address:**

ALPHA AND OMEGA PLUMBING LLC

5191 W CASSIA ST

BOISE, ID 83705

(1) Add or Change Mailing Address:

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

SOUBANH SENETHAVILAY

5191 W. CASSIA ST

BOISE, ID 83705

(2) Change RA and/or RO Address:

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

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

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 before'. 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	Soubanh Senethavilay	Alpha & Omega Plumbing LLC	Boise ID 83705
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem		5191 W. Cassia St.	
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

*Soubanh Senethavilay*

(6) Date:

8-8-19

(7) Type/Print Name:

Soubanh Senethavilay

(8) Title:

Owner

**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.

B0317-5473 09/04/2019 9:22 AM Received by ID Secretary of State Lawrence Denney