State





Idaho Limited Liability Company Reinstatement Form

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

Return completed form to:

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

-FILED-

File #: 0005862813

Date Filed: 8/13/2024 3:57:00 PM

	Phone: (208) 334-2300				
SOS Control Number: 4287637		Filing Status: Inactive-Dissolved (Administrative)			
Limited Liability Company (D)		Date Forme	Date Formed: 05/20/2021 Formation Locale: ID		
Name and Mail Historic Elks TF PO BOX 1206 SUN VALLEY,	LLC		(1) Add or Chang	e Mailing Address:
Trail Creek Rea 480 WASHING KETCHUM, ID	ent (RA) and Registered On Estate Partners, LLC TON AVE 2ND FLOOR 83340 ered Agent (RA) Signature				nd/or RO Address:
(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 Mgr Mem	Name		Business Address		City, State, Zip
✓ Mgr	MATT CURRIE		WASHINGTON		KETCHUM, ID 83340
☐Mgr ☐Mem					
Mgr Mem					
☐ Mgr ☐ Mem				***************************************	
☐Mgr ☐Mem ☐Mgr ☐Mem					
Mgr Mem					
Mgr Mem					
Mgr Mem					
Mgr Mem					
(5) Signature: Am			(6) Date: 8/13/24		
(7) Type/Print Name: ANDREW STOPPAED			(8) Title: MANAGER		

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.