



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form to

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

Reinstatement fee: \$30.00.			450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 43853		Filing Status: Inactive-Dissolved (Administrative)		
Limited Liability Company (D)		Date Formed: 08/24/1999 Fo	rmation Locale: ID	
A & L HALL RA 4220 HIGHWA		(1) Add or Cha	ange Mailing Address:	
DAVID P MCA	STREET STE 100	Office (RO) Address: (2) Change RA	A and/or RO Address:	
(4) Limited Liabili	tered Agent (RA) Signatu	red Office address must be a physical Idaho address If a new agent is appointed in item (2) above, the and addresses of Managers OR Members. Do Nanot affect the entity mailing address. If more sp	new agent must sign here to accept the appointm	
Manager/Member	Name	Business Address	City, State, Zip	
Mgr√Mem MgrMem	LINNEA HALL ALVIN H & L	LINNEA HALL REV TR	4220 HWY 95 NEW MEADOWS, ID 83654	
Mgr	LINNEA L HALL TRUSTEE		4220 HWY 95 NEW MEADOWS, ID 83654	
☐Mgr ☐Mem ☐Mgr ☐Mem				
MgrMem				
(5) Signature:	4/-	(6) Date:	12/22/2020	

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.