



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
Phone: (208) 334-2300

For Office Use Only

-FILED-

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Limited Liability Company (D)

Date Formed: 08/28/2008

Formation Locale: ID

Name and Mailing Address:

RANCHO IDAHO LLC
5749 MORNING DOVE DR
NAMPA, ID 83686-9574

(1) Add or Change Mailing Address:

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

DANIEL JOLLEY
5749 MORNING DOVE DR
NAMPA, ID 83686

(2) Change RA and/or RO Address:

NANNETTE Jolley
5749 MORNING DOVE DR.
NAMPA ID 83686

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 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	Name	Business Address	City, State, Zip
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	DANIEL Jolley	5749 Morning Dove Dr.	Nampa Idaho 83686
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	NANNETTE Jolley	5749 MORNING DOVE DR.	NAMPA ID 83686
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(5) Signature:

~~Daniel Jolley~~ NANNETTE Jolley

(6) Date:

~~2-15-24~~ 2-17-25

(7) Type/Print Name:

~~DANIEL Jolley~~

NANNETTE Jolley

(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.

B0962-9862 02/21/2025 10:14 AM Received by Office of the Idaho Secretary of State