



# Idaho Limited Liability Company Reinstatement Form

File online at: [sosbiz.idaho.gov](http://sosbiz.idaho.gov)

Return completed form to:

Idaho Secretary of State For Office Use Only

Attn: Reinstatements

450 North 4th Street

Boise, ID 83720

Phone: (208) 334-2300

**-FILED-**

File #: 0005142808

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Reinstatement fee: \$30.00.

SOS Control Number: 515702

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 08/08/2016

Formation Locale: ID

## Name and Mailing Address:

(1) Add or Change Mailing Address:

C. RILEY L.L.C.

916 BAKER ST

BOISE, ID 83706

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

(2) Change RA and/or RO Address:

CHRISTOPHER HOWINGTON

916 BAKER ST

BOISE, ID 83706

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 | Christopher Howington | 916 N Baker St   | Boise Id 83706   |
| <input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem | Holly Howington       | 916 N Baker St   | Boise Id 83706   |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |                       |                  |                  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |                       |                  |                  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |                       |                  |                  |
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| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |                       |                  |                  |
| <input type="checkbox"/> Mgr <input type="checkbox"/> Mem            |                       |                  |                  |

(5) Signature:

(6) Date:

2 23 23

(7) Type/Print Name:

(8) Title:

2 23 23 Mgr.

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.

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