

SOS Control Number: 242155

Limited Liability Company (D)

Name and Mailing Address:



## Idaho Limited Liability Company Reinstatement Form

Date Formed: 09/02/2008

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

Formation Locale: ID

(1) Add or Change Mailing Address:

For Office Use Only

-FILED-

File #: 0005789851

Date Filed: 6/13/2024 3:32:00 PM

	TY ROOFING, LLC		r.
1775 W STATE ST # 283 BOISE, ID 83702-3924			, ,
,			į
Registered Ag	gent (RA) and Registered Office (RO) A	idress: (2) Change RA ar	nd/or RO Address:
Daniel L Wickla		, , , , , , , , , , , , , , , , , , ,	TI Place et
1775 W STATI	E ST # 283	-30 23C	5 W. Palouse ST.
BOISE, ID 837	702	Raina	05 W. Palouse st. 83705
		DOST	00700
			₩
Note: The Registered Office address must be a physical Idaho address (no postal box).			
(3) New Registered Agent (RA) Signature:			
(0) 110111 111910	If a new aç	gent is appointed in item (2) above, the nev	v agent must sign here to accept the appointment.
(4) Limited Liabili	ity Companies: Enter names and addresses o	f Managers OP Members - Do NO	T put 'same as last year' or 'same as shoul'
These will not be	accepted. Changes here will not affect the er	ntity mailing address. If more space	e is needed, please add an attachment.
Manager/Member		siness Address	City, State, Zip
Mgr Mem		1207 / Plances	T Page Tol Cont
☐Mgr ☐Mem	Junter / Les Will Control	BUTSE 83705	1 ( 10/15 / La, 85/05
☐ Mgr ☐ Mem		(35/65	
Mgr Mem			
Mgr Mem			
MgrMem			
Mgr Mem			
Mgr Mem			
MgrMem			
MgrMem			
(5) Signature:	della	(6) Date:	13-24
(7) Type/Print Name: / an Wickland (8) Title: Ower / CEO			
			/
	gibly complete the form above. Enclose a check made form and return to the address provided above.	ade payable to the Idaho Secretary o	of State for \$30.00.

Filing Status: Inactive-Dissolved (Administrative)