



Idaho Limited Liability Company Reinstatement Form

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For Office Use Only

Retu -FILED- orm to:

Attn: Reinstatements Date Filed: 7/27/2022 9:21:00 AM

SOS Control Number: 217897 Limited Liability Company (D) Name and Mailing Address:	Filing Status: Inactive-Disso	Dived (Administrat	Boise, ID 83720 Phone: (208) 334-2300
Limited Liability Company (D) Name and Mailing Address:	-	olved (Administrat	
Name and Mailing Address:	Date Formed: 12/03/2007	nveu (Mariii iisaac	ive)
_		Formation	Locale: ID
BLDG 303-305 LLC 303 S FEDERAL WAY BOISE, ID 83705-5925	(1) Add or Change Mai	ling Address:
Registered Agent (RA) and Register LESLIE STITH 303 S FEDERAL WAY BOISE, ID 83705 Note: The Reg	ed Office (RO) Address: (2) Change RA and/or I Idaho address (no p	
(3) New Registered Agent (RA) Sign. 4) Limited Liability Companies: Enter nam These will not be accepted. Changes here	If a new agent is appointed in item es and addresses of Managers OR Mer	mbers. Do NOT put	nt must sign here to accept the appointment. 'same as last year' or 'same as above' needed, please add an attachment.
Manager/Member Name	Business Address		City, State, Zip
Mgr Mem	303 S. Federa	I Way	Boise , 10 83709
(5) Signature: District	Street	6) Date:	27,2022 in Owner

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.