



Idaho Limited Liability Company Reinstatement Form For Office Use Only

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Re -FILED-d form to:

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Reinstatement fee: \$30.00.				–	Date Filed: 6/14/2022 11:59:00 AM Boise, ID 83720	
					Phone: (208) 334-2300	The state of the s
SOS Control Number: 424339 Fili			g Status: Inactive-Dissolved (Administrative)			ie van General Praga
Limited Liability Company (D) Date		Formed: 06/17/2014	Form	Formation Locale: ID		
Name and Mai	ling Address:			(1) Add or Change	e Mailing Address:	Besilis
	IGATION & LANDSCA	PE, LLC				þentir 4 e
301 E 45TH ST	TRLR 1					CT CO
GARDEN CITY	′, ID 83714-4842					
						Here's series of the series of
Registered Agent (RA) and Registered Office (RO) Address: (2) Change RA and/or RO Address:						70
EL CENTRO INC						
	BLVD STE 103					#*************************************
NAMPA, ID 83	687					(1 <u>)</u>
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	Note: The Re	aistered Office	address must be a physi	cal Idaho address	(no postal box).	Incolor S _{co} le Prog ^{eni}
		-			(Police
(3) New Regist	tered Agent (RA) Sign	nature:	now agant is appointed in it.	am (2) above the new	v agent must sign here to accept the appo	introut I
						
(4) Limited Liabili These will not be	ty Companies: Enter nar accepted. Changes here	nes and addre will not affect	sses of Managers OR N the entity mailing addre	ess. If more space	T put 'same as last year' or 'same e is needed, please add an attach	as above ment.
Manager/Member Name			Business Address	<u> </u>	City, State, Zip	III. J.
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(E) Q:		,		(C) D-4-:	2 11 N-A0	o o
(5) Signature:	dianel Doc	ション		(6) Date:	6-14-2016	(ii)
(7) Type/Print Nam	ie: Minst	Rose	C.L.	(8) Title:	war Inst	: 0
Instructions: Leg	gibly complete the form abov	/e. Enclose a c	heck made payable to the	e Idaho Secretary (of State for \$30.00.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Sign and date this form and return to the address provided above.