



# Idaho Limited Liability Company Reinstatement Form

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

Return completed form to  
Idaho Secretary of State  
Attn: Reinstatements  
450 North 4th Street  
Boise, ID 83720  
Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 222034

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 01/16/2008

Formation Locale: ID

**Name and Mailing Address:**

(1) Add or Change Mailing Address:

HOME REJUVENATOR LLC (THE)  
3408 POLELINE RD  
POCATELLO, ID 83201

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

(2) Change RA and/or RO Address:

SCOTT D WEAKLY  
3408 POLELINE RD  
POCATELLO, ID 83201

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	Scott Weakly	3408 Poleline Rd	Pocatello Id. 83201
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(5) Signature:

*Scott Weakly*

(6) Date:

~~6-1-20~~ 7-1-2021

(7) Type/Print Name:

Scott D Weakly

(8) Title:

Manager  
RWATV 7-1-2021

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.

B0613-6880 07/06/2021 10:59 AM Received by ID Secretary of State Lawrence Denney