



Idaho Limited Liability Company Reinstatement Form

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Attri. remsiatements File #: 0005249219 400 North 4th Street

	Reinstat	ement fee: \$30.00		Phone: (208) 334-2300				
SOS Control N	Number: 178930	Filing	Status: Inac	tive-Dissolved (Administrative)				
Limited Liability Company (D)		Date i	Date Formed: 10/30/2006 Forma			ation Locale: ID		
Name and Ma SAKI CONSTR 12921 W BALE BOISE, ID 837	RUCTION LLC DCYPRESS DR			(1) Add	or Change Mail	ing Address:		
SENAD SAKA	NOVIC DCYPRESS DR 713	Jistered Office (R 0			nge RA and/or F			
(4) Limited Liabili These will not be	accepted. Changes	If a r	ses of Manage	ers OR Members ng address. If m	. Do NOT put	'same as last year' or eeded, please add ar	r 'same as abov	
Manager/Member Mgr Mem	Name	SAKANOU	Business A	Address W- BAG	, , , , , , , , , , , , , , , , , , , ,	City, State, Zip	VD 83,	
Mgr Mem Mgr Mem		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12 921		(ypass	De Boix	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
(5) Signature:	SI	hd_		(6) Date	· cs/	123/23		
(7) Type/Print Nam	ne: SErnd	SAKA	revic	(8) Title:	0'0	123/23 XNER /M	gr	
Instructions: Leg	gibly complete the form	above. Enclose a che	eck made pava	ble to the Idaho S			U	

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