



Idaho Limited Liability Company Reinstatement Form

File online at: sos.idaho.gov

Return completed form to: Idaho Secretary of State Attn: Reinstatements 450 North 4th Street

Reinstatement fee: \$30.00.			Boise, ID 83720 Phone: (208) 334-2300	10/
SOS Control Number: 161506 Fil		Filing Status: Inactive-Diss	olved	N 2
Limited Liability Company (D) Da		Date Formed: 04/24/2006	Formation Locale: ID	19
Name and Mai BLACK CANYO 2664 SAND HO CALDWELL, ID	ON ENTERPRISES LLC OLLOW RD		(1) Add or Change Mailing Address:	12:24 PM
Registered Ag GEORGE E BO 2664 SAND HO CALDWELL, ID	DCK JR DLLOW RD D 83607	d Office (RO) Address:	(2) Change RA and/or RO Address: al Idaho address (no postal box).	Received by
(4) Limited Liabili These will not be	accepted. Changes here w	If a new agent is appointed in items s and addresses of Managers OR Me vill not affect the entity mailing addres	embers. Do NOT put 'same as last year' or 'same as all s. If more space is needed, please add an attachment	bove'
Manager/Member	Name	Business Address	City, State, Zip	7
Mgr Mem	CZEORQE E	Bak 2664 Sand	Hollew Candwall Td 836	etary of State La
(5) Signature:	Jy 2 3/		(6) Date: 9/11/19	awerende
(7) Type/Print Name: George BOCK (8)		(8) Title: Pas	<u>.</u>	
	gibly complete the form above. form and return to the address	Enclose a check made payable to the I	daho Secretary of State for \$30.00.	ñ U