



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov Reinstatement fee: \$30.00.

Return completed form to:

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

For Office Use Only

-FILED-

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Limited Liability Company (D)

Date Formed: 05/09/2008

Formation Locale: ID

Name and Mailing Address:

MOSCOW MEDICAL PROPERTIES LLC
~~JOHN GRAUKE~~ Deceased
1412 LANNY DR
MOSCOW, ID 83843-3572

(1) Add or Change Mailing Address:

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

~~JOHN H GRAUKE~~ Deceased
652 PAVEL CT
MOSCOW, ID 83843

(2) Change RA and/or RO Address:

Donna Grauke
1412 Lanny Dr.
Moscow, Id 83843

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 type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Donna Grauke	1412 Lanny Drive	Moscow, Id 83843
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

Donna Grauke

(6) Date:

1/30/25

(7) Type/Print Name:

Donna Grauke

(8) Title:

MEMBER (POA)

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.

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