



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

450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300 For Office Use Only

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Date Filed: 3/26/2025 10:39:00 AM

	Phone: (208) 334-2300				2
SOS Control Number: 387048		Filing Status: Inactive-Dissolved (Administrative)			25
Limited Liability Company (D)		Date Formed: 06/17/2013	Formation	Locale: ID	U1
Name and Mailing Address: C & R DRYWALL, LLC 3591 S WINDY RIDGE DR NAMPA, ID 83686-4951			(1) Add or Change Mailin	ng Address: JOEY Dr JO8368	20:39 86:39
	ent (RA) and Registered Off	ico (RO) Address:	(2) Change RA and/or R		전 면 면
CESAR JIMEN		ice (NO) Address.	1136 W	FIGOR Dr	ω C
3591 S WINDY RIDGE DR NAMPA, ID 83686			Nampa	Eiger Dr ID 8366	ived
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 appointm					
	ty Companies: Enter names and accepted. Changes here will not	addresses of Managers OR N	Members. Do NOT put 's	same as last year' or 'sam	e as abo ū e'.
Manager/Member	Name	Business Address	\$	City, State, Zip	0
Mgr Mem	Romelia B	1000 1136 W.C	iger dr	Nampa II	83686
Mgr Mem Mgr Mem	Cesar Jim	eno 1136W e	liger dr	Nampa I	D 85 686
Mgr Mem Mgr Mem					
Mgr Mem				-	<u> </u>
Mgr Mem					5
Mgr Mem					72
Mgr Mem					D
Mgr Mem					C
Mgr Mem					(D)
(5) Signature: (6) Date: (73/26/2025					tary
(7) Type/Print Name: CCSUS JIMCTAZZ (8) Title: OWNCY					<u>O</u>