



Idaho Limited Liability Company Reinstatement Form

File online at: 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: 599797
Limited Liability Company (D)

Filing Status: Inactive-Dissolved (Administrative)

Date Formed: 04/02/2018

Formation Locale: ID

Name and Mailing Address:
THORWART COMPANY LLC
PO BOX 224
BONNERS FERRY, ID 83805

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:
JUANITA M THORWART
803 SANTA FE LANE
BONNERS FERRY, ID 83805

(2) Change RA and/or RO Address:

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	JAMES THORWART	P.O. BOX 224	BONNERS FERRY, ID 83805
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature: Juanita Thorwart

(6) Date: 4/22/21

(7) Type/Print Name: JUANITA THORWART

(8) Title: RA (MANAGER) OWNER

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.

B0596-5519 04/26/2021 11:16 AM Received by ID Secretary of State Lawrence Denney