



## Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

For Office	Use	Only
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Returned form to:

File #: 0005218564 ements 450 North 4th Street

Reinstatement fee: \$30.00.			Date Filed: 4/28/2023 10:29:00 AM	N	
	Nemotatomon roc.	400.00		Phone: (208) 334-2300	΄ ∞
SOS Control I	Number: 4121958	Filing Status: Inactive-Dissolve	ed (Administra	ative)	_ N
Limited Liability Company (D)				on Locale: ID	
Name and Ma	iling Address:	(1)	Add or Change N	Mailing Address:	<u> </u>
	CONSTRUCTION LLC				2
380 EAGLE C					29
MOYIE SPRIN	GS, ID 83845-5006				
Registered Aç	gent (RA) and Registered O	ffice (RO) Address: (2)	Change RA and/	or RO Address:	AM Re
MATTHEW HO					Ü
380 EAGLE C					H.
MOYIE SPRIN	IGS, ID 83845				iVe
					ᅀ
	Note: The Registere	d Office address must be a physical Id	laho address (ne	p postal box).	γd
(3) New Regis	stered Agent (RA) Signature	<b>:</b>			
(o) itom itogra	no, ou / igom (i.v.) oignatur		above, the new ag	gent must sign here to accept the appointment.	—О —Н
				out 'same as last year' or 'same as above s needed, please add an attachment.	e'. Η Ή Ω
Manager/Member	Name ,	Business Address		City, State, Zip	$\exists^{\mathfrak{o}}$
Mgr ☐ Mem	Matthew Holdeman	380 Eagle Crest	Rd	Mayie Springs 10 83845	믺
☐Mgr XMem	Bridget Holdeman	380 Fagle Crest	Rd	Mayie Springs 10 83845	╝.
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(5) Signature:	Marke Helle	(6) [	Date: W	24/23	
(7) Type/Print Nan	ne: Matthew Holde	mom (8)	Title: Man	ag er	—'₹
Instructions: Le	gibly complete the form above. Enc	lose a check made payable to the Idah	no Secretary of S	State for \$30.00.	H

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