



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 Bolse, ID 83720 For Office Use Only

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1	Phone: (208) 334-2300					
SOS Control Number: 4573409 Filing		Filing Status: Inactive-D	Status: Inactive-Dissolved (Administrative)			
Limited Liability Company (D) Date F		Date Formed: 01/17/202	2	Formation Locale:	ID	
Name and Mail BALDY PAINT PO BOX 2606 KETCHUM, ID	& FINISHES LLC		(1) Add or C	Change Mailing Addres:	E:	
	· · - · ·	ice (RO) Address:	(2) Change	RA and/or RO Address	K.	
(4) Limited Liabili	Note: The Registered tered Agent (RA) Signature: ty Companies: Enter names and accepted. Changes here will not	If a new agent is appointed in addresses of Managers OR	Kem (2) above, t	the new agent must sign i	here to accept the appointment.	
Manager/Member	Name	Business Addre	BS	City. S	state, Zip	
MgrMem MgrMem	Padro Gonzalez Clem	enta 34 Galen	a Peak		tchum, ID, 83340	
(5) Signature:	Edro Sona	-	(6) Date: (01/30/202	.5	
(7) Type/Print Nam	· Pedro Gonza	alez-Clement	€ (8) Title:	member		

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.