



Idaho Limited Partnership Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form ton Idaho Secretary of State Attn: Reinstatements 450 North 4th Street

| Reinstatement fee: \$30.00. | | Boise, ID 83720 Phone: (208) 334-2300 | 22, |
|--|---|--|----------------|
| SOS Control Number: 3675351 | Filing Status: Inactive-Dis | ssolved (Administrative) | 2 |
| Limited Partnership (D) | Date Formed: 11/12/2019 | Formation Locale: ID | 021 |
| Name and Mailing Address: Foxtrot Customs LLLP STE 16 3821 PROFESSIONAL WAY IDAHO FALLS, ID 83402-7319 | | (1) Add or Change Mailing Address: | 11:22 AM |
| | e Registered Office address must be a physi | (2) Change RA and/or RO Address: | Received by |
| (3) New Registered Agent (RA) S | | em (2) above, the new agent must sign here to accept the appoint | - |
| not be accepted. Changes here will n | ot affect the entity mailing address. If more | NOT put 'same as last year' or 'same as above'. The e space is needed, please add an attachment. | se will |
| Name | Business Address | City, State, Zip | <u>ğ</u> 27 |
| Michael McCarly Nurk Cutkins | 3221 Pinfissed will | | egary of State |
| (5) Signature: The Mark (a) | 4.tkins | (6) Date: (2-/6 えの) (8) Title: (なった) General Partner | Lawerenc |
| | above. Enclose a check made navable to the | e Idaho Secretary of State for \$30.00 | 70 |

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