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
Boise, ID 83720
Phone: (208) 334-2300

For Office Use Only

-FILED-

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Limited Liability Company (D) Date Formed: 10/12/2016 Formation Locale: ID

Name and Mailing Address:
MORNINGSTAR MEMORY CARE AT ENGLEFIELD GREEN, LLC
732 N SANTA PAULA PL
BOISE, ID 83712-6527

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:
GIVENS PURSLEY CORPORATE SERVICES LLC
601 W BANNOCK ST
BOISE, ID 83702

(2) Change RA and/or RO Address:
DOUGLAS TAMURA
732 N SANTA PAULA PL
BOISE, ID 83712

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature: [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
☐ Mgr ☒ Mem	DOUGLAS TAMURA	P.O. BOX 8001	BOISE, ID 83707
☐ Mgr ☐ Mem			
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(5) Signature: [signature] (6) Date: 9/20/2023

(7) Type/Print Name: DOUGLAS TAMURA (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.

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