



Idaho Limited Liability Company Reinstatement Form

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

SOS Control Number: 42				2 // 18 // 18
	23171	Filing Status: Inactive-Dissolved (A	dministrative)	77
Limited Liability Company	(D)	Date Formed: 06/05/2014	Formation Locale: ID	<u></u>
B & K UNIVERSITY PROF 131 S 9TH AVE POCATELLO, ID 83201-5				AM Xec
POCATELLO, ID 83201	Note: The Registered	Office address must be a physical Idaho a	ddwaga (no nogtal boy)	y Ya
(3) New Registered Agen (4) Limited Liability Companie	at (RA) Signature:	If a new agent is appointed in item (2) above addresses of Managers OR Members.	the new agent must sign here to accept the app	e as ab
(4) Limited Liability Companie These will not be accepted. C	at (RA) Signature:	If a new agent is appointed in item (2) above, addresses of Managers OR Members. It affect the entity mailing address. If more	the new agent must sign here to accept the app Do NOT put 'same as last year' or 'same e space is needed, please add an attact	H pointmen e as ab
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