



## **Idaho Limited Liability Company Reinstatement Form**

File online at: sosbiz.idaho.gov

## Return completed form to:

Idaho Secretary of State Attn: Reinstatements 450 North 4th Street Boise, ID 83720

					450 North 4th Street	
Reinstatement fee: \$30.00.					Boise, ID 83720	
				! 	Phone: (208) 334-2300	
SOS Control N	umber: 223777	Filing Status: Inactive-Dissolved (Administrative)				
Limited Liability Company (D)		Date Formed: 02/05/2		B Formation Locale: ID		
Name and Mailing Address:				(1) Add or Change N	Mailing Address:	
PHILIPO PROF	PERTIES, LLC					
<b>2631 CORTE E</b>	ELENA					
PLEASANTON	, CA 94566-5719					
Registered Agent (RA) and Registered Office (RO) Address: LARRY C ASHCRAFT 430 N 6TH E				(2) Change RA and/or RO Address:		
MOUNTAIN HO	OME, ID 83647					
	Note: The Regis	stered Office addr	ess must be a physi	cal Idaho address (n	o postal box).	
(2) Nove Domini	tanad Ament (DA) Simos	hurai		•	•	
(2) New Kegis	tered Agent (RA) Signat		agent is appointed in its	em (2) above, the new a	gent must sign here to accept the appointment.	
/4\ 4 !!4 - 4 ! !!!!	t. Companies. Entername				put 'same as last year' or 'same as above	
(4) Limited Liabili These will not be	accepted. Changes here w	vill not affect the	entity mailing addre	ess. If more space i	s needed, please add an attachment.	
Manager/Member Name		Business Address		·	City, State, Zip	
Mgr Mem	YEVGENI PHILI	POVITCH	2631 Corte	Elena	Pleasanton, ca.	
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(5) Signature:	Zengrui Din	Soutet		(6) Date: 5-	15-2020	
(7) Type/Print Nar		PHILIPO	VITCH	(8) Title: Man	ager	
Instructions: Leg	gibly complete the form above.	Enclose a check	made payable to the	e Idaho Secretary of	State for \$30.00.	