



## **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

Reinstatement fee: \$30.00.				Boise, ID 83720 Phone: (208) 334-2300	
Limited Liability Company (D) Da		Filing Status: Inactive-I		Formation Locale: ID	
		Date Formed: 01/24/200			
	iling Address:		(1) Add or Change I	Mailing Address:	
BIG ROCK VA 2752 E BOGIE	•				
POST FALLS,					
·					
Registered Ag	gent (RA) and Registered	Office (RO) Address:	(2) Change RA and/or RO Address:		
WILLIAM R MI	ILLSAP				
2752 E BOGIE					
POST FALLS,	ID 83854				
	Note: The Registe	ered Office address must be a phy	/sical Idaho address (r	no postal box).	
(2) Now Domin	Acred Ament (DA) Circusto				
(3) New Regis	stered Agent (RA) Signatu	If a new agent is appointed in	item (2) above the new :	gent must sign here to accept the appointm	ent.
	accepted. Changes here wil		lress. If more space i	put 'same as last year' or 'same as a s needed, please add an attachmen City, State, Zip	
Mgr / Mem	William A. Mills	4P 2752. E. B.		POST FAILS I.D. 8385	
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Mgr Mem	Wille R Mills	M. Hena	(6) Date: 5 - (8) Title: Max	8-7irza	

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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