



Idaho Limited Liability Company Reinstatement Form

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	Idaho Limited Liabilit File online at: sosbiz.idaho.gov Return completed form to: Idaho Secretary of State Attn: Reinstatements 450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	y Company Reinstatement F v Reinstatement fee: \$30.00.	FILED- File #: 0005444687 Date Filed: 10/13/2023 12:49:00 PM
		Filing Status: Inactive-Dissolved (Adminis	trative)
Name and Ma Lorrie Panzeri 6104 S SNOW BOISE, ID 83	/DRIFT PL	(1) Add or Change	Mailing Address: בּ
Lorrie L Panze 6104 S SNOV BOISE, ID 83	VDRIFT PL 709	ee (RO) Address: (2) Change RA and ffice address must be a physical Idaho address (no postal box).
(4) Limited Liabi These will not be	lity Companies: Enter names and a e accepted. Changes here will not a	ddresses of Managers OR Members. Do NOT iffect the entity mailing address. If more space	put 'same as last year' or 'same as above' is needed, please add an attachment.
Manager/Member Mgr Mem Mgr Mem		Business Address	City, State, Zip Buise 20183749
(5) Signature:	J.Par	(6) Date:	
(7) Type/Print Na	me: Locrie fana	$2erl$ (8) Title: m_c	anager'

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.