



## Idaho Limited Liability Company Reinstatement Form

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For Office Use Only

Return completed form to:
Idal -FILED- tate

State

File #: 0005412335\*ements 450 North 4th Street Date Filed: 9/27/2023 9:55:00 AM

Reinstatement fee: \$30.00.				20100, 12 00.20	
				Phone: (208) 334-2300	
SOS Control I	Number: 196289	Filing Status: Inactive-Dissolved (Administrative)			
Limited Liability Company (D)		Date Formed: 04/17/2007 Formation Locale: ID			
Name and Ma	iling Address:	(1)	Add or Change Ma	illing Address:	
DRY LOT, LLC	;				
BERNARD FR					
116 VALLEY C					
HAILEY, ID 83	3333-5164				
Registered Ac	gent (RA) and Registered (	Office (RO) Address: (2)	Change RA and/or	RO Address:	
Bernard I Fried		,			
116 VALLEY C					
HAILEY, ID 83	3333				
	Note: The Register	ed Office address must be a physical Id	laho address (no	postal hox).	
	•		(110	F	
3) New Regis	tered Agent (RA) Signatur		ahaya tha naw ass	ent must sign here to accept the appointmen	
			<u> </u>		
4) Limited Liabili hese will not be	ity Companies: Enter names a accepted. Changes here will i	nd addresses of Managers OR Memb not affect the entity mailing address. I	ers.  Do NOT pu f more space is	it 'same as last year' or 'same as at needed, please add an attachment	OVE
lanager/Member	Name	Business Address		City, State, Zip	
<b>∡</b> Mgr	JG LAVIN	GII VALLEY GLUS	DENE	HAILEY TO BESTE	
Mgr Mem		<u> </u>			
Mgr Mem	DARRELL RUBEL	21 HIPDEN LA	ke deine	UAILEY IN 83333	
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MgrMem				<i>,</i>	
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	$M = \frac{1}{\Lambda}$				
(5) Signature:	Makaler	1 (6)	Date: 🥕 / a	112	
			2/-/		
(7) Type/Print Nam	ie: B.T. FRIEDL	ANDER (8)	Title: MANA	GER	
Instructions: Le		close a check made payable to the Idah	o Secretary of St	ate for \$30.00	_

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.