



## Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov Reinstatement fee: \$30.00.

Return completed form to:

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

Phone: (208) 334-2300

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

For Office Use Only

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SOS Control Number: 30282		Filing Status: Inactive-Dissolved (Administrative)			24
Limited Liability	Company (D)	Date Formed: 01/07/1998	Formation	Locale: ID	<u></u>
Name and Mail BRIDGER GLO PO BOX 396 BOISE, ID 837	BAL COMMUNICATIONS LL		(1) Add or Change Mailin	g Address:	0:46 AM F
STEVE C SWA 4208 EDGEMO BOISE, ID 837	ONT RD 06	Office address must be a physica		stal box).	Received by Of
		If a new agent is appointed in item			<del></del>
(4) Limited Liability These will not be	ty Companies: Enter names and accepted. Changes here will not	addresses of Managers OR Me affect the entity mailing address	embers. Do NO1 put s s. If more space is ne	same as last year or sa eded, please add an att	me as above. achment.
Mapager/Member	Name	Business Address		City, State, Zip	<u>Q</u>
Mgr Mem	STEVE C. JUH	5300 4208 EDGE	MONT ST	BOIL TI	83702
Mgr Mem	5. ANDREW SWA		a	11 R	55
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(5) Signature:	Stu Com-		(6) Date: 1 / 7	124	ary
(7) Type/Print Nam	ne: STEYE C	SWANSON	(8) Title: MCR	·	0
Instructions: Le	gibly complete the form above. Encl		Idaho Secretary of Stat	e for \$30.00.	Ηη 70