		ability Company Rein aho.gov Reinstatement fee: \$3		<b>orm</b> For Office Use Only <b>-FILED-</b> File #: 0005433292 Date Filed: 10/2/2023 11:13:00 AM	E6823-8917 10/02/2
SOS Control Number: 330254 Filing Status: Inactive-Dissolved (Administrative)					50 753 65)
Limited Liabil	ity Company (D)	Date Formed: 09/28/201	Formed: 09/28/2011 Formation Locale: ID		Manthal Jonentit
RUDY & JEA	<b>ailing Address:</b> NNE BARCHAS CAMAS S SSCREEK LN 3706-6707	ST., LLC	(1) Add or Change	Mailing Address:	in the second second Second second second Second second second Second second second Second second second Second second second Second second second Second second se
					-10 10
JEAN L BAR	SSCREEK LN	d Office (RO) Address:	(2) Change RA and	d/or RO Address:	
	Note: The Pasi	stered Office address must be a phy	sical Idaho addroco (	no nostal hov)	herma Mash Pali <sup>ers</sup>
(3) New Regi	istered Agent (RA) Signa		sicai iuano aduress (	no postal box).	(

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above? These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
Mgr Mem	Jean L. Barchas	3254 J. CROSSCREEKLN	BO1-50, ID 83706
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			) In the second
(5) Signature:	Jean L. Barch	(6) Date: 9/29/5	<b>१८२३</b> र

(8) Title:

Recistered

**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.

Barchas

(7) Type/Print Name:

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