



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

For Office Use Only
Return completed form to:
Ida -FILED-itate

(S) (I) (I)

(T)

[A]

Affin: Deinstatements File #: 0004789550 450 Nortn 4th Street Date Filed: 6/15/2022 11:52:00 A

Reinstatement fee: \$30.00.				Phone: (208) 334-2300	
0000		Filia Otata da ativa Di			The state of the s
SOS Control Number: 424962		•	Filing Status: Inactive-Dissolved (Administrative		E.
Limited Liability Company (D)		Date Formed: 06/23/2014	Formation	Locale: ID	Ph.
Name and Mai 208 UNDERGE 252 E FRONT BOISE, ID 837	ROUND NORTHWEST LLC ST #428		(1) Add or Change Maili	ng Address:	frank es si frank frank
NO AGENT	ent (RA) and Registered O SNED OR INVALID 702 (ADA)	ffice (RO) Address:	(2) Change RA and/or R BO FINO ZSZ + TSOISO.	O Address: SBCIC FRONTSH#478 LD GJ 702	
	Note: The Registere	d Office address must be a physi			Ü
(4) Limited Liabili These will not be	accepted. Changes here will n	If a new agent is appointed in its ad addresses of Managers OR N ot affect the entity mailing addre	Members. Do NOT put 'ess. If more space is ne	must sign here to accept the appointments as last year' or 'same as a seded, please add an attachmen	bove¦,
Manager/Member	Name	Business Address	3	City, State, Zip	**
Mgr	BO GROSBUTC	15C F F	1 PON 151 HY 28	101SE, ID 837	
(5) Signature:	e: BO GROSE		(6) Date: 6 / 5	/22 1000	1 m
(7) Type/Print Nam	e: 120 07120>130		(8) Title:	TOTOR	

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.