



## 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

For Office Use Only

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File #: 0005745818

Date Filed: 5/15/2024 9:48:00 AM

SOS Control Number: 443831		Filing Status: Inactive-Dissolved (Administrative)			124
Limited Liability Company (D)		Date Formed: 12/24/2	2014 Formati	on Locale: ID	ي ص
Name and Mailing Address: SNAKE RIVER CASE AND MILL LLC 1850 N MAIN ST			(1) Add or Change M	ailing Address:	: 48
POCATELLO, ID 83204-2509					AM
				· **	₽ 0
Registered Ag BENJAMIN HO 1850 NTH MAI POCATELLO,	N ST	fice (RO) Address:	(2) Change RA and/o	or RO Address:	Cei∨ed
POCATELLO,	10 63204				γ
(3) New Regis	Note: The Registered tered Agent (RA) Signature:			p postal box).	Off
These will not be	ity Companies: Enter names and accepted. Changes here will no	l addresses of Managers t affect the entity mailing a	OR Members. Do NOT p address. If more space is	ut 'same as last year' or 's needed, please add an a	:ame as a∰ove'
Manager/Member	Name	Business Add		City, State, Zip	
∐Mgr ∑Mem	Benjamin Hopkin	S 1850 N Main	<u>St.</u>	Pocatello, ID	83264
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(5) Signature:	B	_	(6) Date: \$\frac{413}{13}	20284	ary
(7) Type/Print Nam	ie: Benjamin He	pkins	(8) Title: Mem	ber	о Н
	<u> </u>	/			70

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.