



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form to:

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

Reinstatement fee: \$30.00.						Boise, ID 83720 Phone: (208) 334-2300		
SOS Control Number: 294701 Filing			Status: Inactive-Dissolved (Administrative)				<u> </u>	
Limited Liability Company (D) Date			Formed:	07/23/2010	Formation L	ocale: ID	6	
6207 N LAFAY	ARTNERS L.L.C.	39		(1) Add or Change Mailin	g Address:	0.00	
Registered Ag MARIANNE M 3931 SCHREIE COEUR D' ALE	BER WAY ENE, ID 83815	,			2) Change RA and/or RC			
(3) New Regist	tered Agent (RA)	Signature:				nust sign here to accept the appoint		
(4) Limited Liabili These will not be Manager/Member	ty Companies: Ente accepted. Changes	r names and addres here will not affect t	he entity	anagers OR Me mailing address	mbers. Do NOT put 's . If more space is nee	ame as last year' or 'same as eded, please add an attachmo City, State, Zip	above'z	
Mgr Mem	MARIANNE	M. AHREND		SCHREIBL	EP W)AY	COEUR D'ALENE	TD !	
Mgr Mem Mem	CEDOGE M.	AHREND	457	BT AVE NU	DEPURATA WI	9 838	15	
(5) Signature	LUMINAL MA	ahreid		(6) Date: 7-27-	<i>9021</i>	- (
(7) Type/Print Name: MARIANNE M. AHREND (8) Title: PRESIDENT /MGR								
	gibly complete the form form and return to the				laho Secretary of State	•	ţ	