



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

-FILED-

File #: 0005752033

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SOS Control Number: 371350

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 01/15/2013

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

4-M CATTLE COMPANY L.L.C.
1948 LIGNITE RD
SAGLE, ID 83860-9247

Registered Agent (RA) and Registered Office (RO) Address:

(2) Change RA and/or RO Address:

JERALYN MIRE
1948 LIGNITE RD
SAGLE, ID 83860

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature: _____

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
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Martin H. Mire	1948 Lignite Rd	Sagle, ID 83860
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Daniel J Mire	"	"
<input checked="" type="checkbox"/> Mgr <input type="checkbox"/> Mem	Jeralyn Mire	"	"
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: _____

Jeralyn Mire

(6) Date: _____

5/19/24

(7) Type/Print Name: _____

Jeralyn Mire

(8) Title: _____

Bkkr/Sec/treas./Mgr

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.

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