



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

Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 332287

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 10/24/2011

Formation Locale: ID

Name and Mailing Address:

B & E WHOLESALE LLC

PO BOX 590

FRUITLAND, ID 83619-0590

(1) Add or Change Mailing Address:

1135 NW 19th St.
FRUITLAND ID 83619

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

KENDRA FREITAG

1135 NW 19TH ST

FRUITLAND, ID 83619

(2) Change RA and/or RO Address:

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 checked="" type="checkbox"/> Mem	Kendra Freitag	1135 NW 19th St	FRUITLAND ID 83619
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(5) Signature:

Kendra Freitag

(6) Date:

1-18-21

(7) Type/Print Name:

Kendra Freitag

(8) Title:

Owner Mgr MEM

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.

B0572-0698 01/22/2021 1:23 PM Received by ID Secretary of State Lawrence Denney