



Idaho Corporation Reinstatement Form

File online at: sos.idaho.gov

Return completed form to:

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

reinstatement tee: 530.00.						e, ID 83720 ne: (208) 334	1-2300 U
SOS Control Number	Filing Status: Inactive-Dissolved						
Non-Profit Corporation (D)		Date Formed:	10/26/2004	Forma	ation Locale	: ID	N E
Name and Mailing Ad STREAMVIEW HOME PO BOX 52 STAR, ID 83669-0052	OWNERS ASSOCIAT	ION, INC.	(1)) Add or Change	e Mailing Addre	ss:	19 C 2 : 01
Registered Agent (RA LANDRA GIRARD 675 N RAMEY CREEK STAR, ID 83669	AVE Note: The Registered		(4)) Change RA an			≥ X a C a L \ a a b \
(3) New Registered A	gent (RA) Signature:_	If a new accent	s appointed in item (2	Diahova the new	anent must sini	here to accen	t the appointment.
(4) Corporations: Enter par	nes and husiness addresses					•	t the appointment.
Title Name	ns: Enter names and business addresses (with zip code) of the President, Vice President Name Business Address			Tresident, occ	City, State, Zip		
V.P. Sec. am Irias Ja	ny Butters us altmon our armstrone ndry Gerard	475	Rewly Cr n Rame	ulc Ao E	Stan	71	83669
(5) Board of Directors name				· · · · · · · · · · · · · · · · · · ·			<u>C</u>
		susiness Address			City, State, Zip		
Kuby Pile	5 7	P8 7/1 C	Web) Ch	wek Hue	Stars		
^							T)
(5) Signature: Day	ndra Dura	Ud	(6)	Date: 3	124/a	2020	a a =

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.