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State





## 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

For Office Use Only

-FILED-

File #: 0006006174

Date Filed: 11/29/2024 2:57:00 PM

	Phone: (208) 334-2300			
SOS Control Number: 4691983		Filing Status: Inactive-Dissolved (Administrative)		
Limited Liability Company (D)		Date Formed: 04/07/2022	Formation I	Locale: ID
Name and Ma Fleener Brothe 1048 ESTES R MOSCOW, ID	iling Address: rs Farm LLC	(1)	Add or Change Mailin	g Address:
DUSTIN FLEE 1048 ESTES R MOSCOW, ID	RD # A 83843 Note: The Registere	ed Office address must be a physical l	Change RA and/or RC	
	tered Agent (RA) Signature ty Companies: Enter names ar	If a new agent is appointed in item (2		nust sign here to accept the appointment.  ame as last year' or 'same as above'
These will not be Manager/Member	accepted. Changes here will n	ot affect the entity mailing address.	If more space is nee	
Mgr Mem		Business Address	Da 1	City, State, Zip
Mgr   ∑Mem	Cray Fleerer	2722 Lawson 1	Koad	Palouse Wa. 99161
Mgr \ Mem	Dustin Fleener	1048 F3165 RC	ca 1	14 00 CON TO 62743
Mgr X Mem	Phil Fleener Tim Fleener	333 CONDARY	la DA	Plummer T1 83851
Mgr	17m) Fleener	353 Canyon Kin	ge Dir	Plummer, Id. 83851
Mgr				
Mgr				<del></del>
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MgrMem		1		
MgrMem				
(5) Signature:	Laig Florer	(6)	Date: $//-2$	14-2024
(7) Type/Print Name: Craig Fleener			(8) Title: Manager	
	gibly complete the form above. End form and return to the address pro	close a check made payable to the Idal	ho Secretary of State	for \$30.00.