

Reinstatement for W 39414

No. W 39414	Reinstatement Annual Report Form ADMIN DISSOLVED 08/06/2009		2. Registered Agent and Office (NOT A P.O. BOX) KEVIN HINTZ 1206 N IDAHO ST POST FALLS ID 83854	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. KEVIN HINTZ FAMILY DENTISTRY L.L.C. 1206 N IDAHO ST POST FALLS ID 83854			
	3. New Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.				
Office Held	Name	Street or PO Address	City	State Country Postal Code
Member	Kevin Hintz	1206 N. Idaho St,	Post Falls,	ID 83854
Manager	Richelle Hintz	1206 N. Idaho St,	Post Falls,	ID 83854
5. Organized Under the Laws of:		6.		
IDAHO W 39414		Signature: 	Date: 8/21/09	
		Name (type or print): Richelle Hintz	Title: Manager	
Issued 08/12/2009 by SL1				

FILED EFFECTIVE