



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

For Office Use Only

Ret **-FILED-** form to
Idal state

File #: 0004860904 lements

150 North 4th Street
Date Filed: 8/12/2022 10:00:00 AM
Boise, ID 83720

Phone: (208) 334-2300

Reinstatement fee: \$30.00.

SOS Control Number: 4225899

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 04/02/2021

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

McCracken Plumbing LLC.

PO BOX 23

LACLEDE, ID 83841-0023

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

(2) Change RA and/or RO Address:

Dennis S McCracken

54 EMILY LN

LACLEDE, ID 83841

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 type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Dennis McCracken	PO Box 23	Laclede ID 83841
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(5) Signature:

Dennis McCracken

(6) Date:

8-10-22

(7) Type/Print Name:

Dennis McCracken

(8) Title:

McCracken Plumbing/
Member

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.

B0719-7346 08/12/2022 10:00 AM Received by ID Secretary of State Lawrence Denney