



Idaho Limited Liability Company Reinstatement Form

File online at: sosblz.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: 371693

Filing Status: Inactive-Dissolved (Administrative)

Limited Liability Company (D)

Date Formed: 01/18/2013

Formation Locale: ID

Name and Mailing Address:

(1) Add or Change Mailing Address:

LARCHWOOD FARMS LLC
3430 E SELTICE WAY
POST FALLS, ID 83854

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

(2) Change RA and/or RO Address:

NO AGENT
AGENT RESIGNED OR INVALID
BOISE, ID 83702 (ADA)



Marla J Hedman
1250 N Corbin Rd
Post Falls, ID 83854

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

Marla J Hedman

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	Marla J Hedman	3430 E Seltice Way	Post Falls, ID 83854
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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(5) Signature:

Marla J Hedman

(6) Date:

8-4-2021

(7) Type/Print Name:

Marla J Hedman

(8) Title:

manager, owner

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.

B0626-2593 08/09/2021 3:18 PM Received by ID Secretary of State Lawrence Denney