



## **Idaho Limited Liability Company Reinstatement Form**

File online at: sosbiz.idaho.gov

## Return completed form to:

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

Reinstatement fee: \$30.00.				Phone: (208) 334-2300		
		Filing Status: Inactive-Dissolved (Administrative)				
		Date Formed: 02/22/2	te Formed: 02/22/2006 Formation		on Locale: ID	
Name and Mai HEINTZ FAMIL 115 8TH AVE N BUHL, ID 833	Y, LLC N		(1) Add or (	Change Mailing Address:		
NO AGENT AGENT RESIG BOISE, ID 837	,	Office address must be a	Trav > 12477 Boiss		E	
		If a new agent is appointed	d in item (2) above, i	he new agent must sign he	ere to accept the appointment.	
	ty Companies: Enter names and accepted. Changes here will not					
Manager/Member Name		Business Add	Business Address		City, State, Zip	
Mgr Mem	DIANE TKENDRICK	8 8358 W	PAMONA CT	Base	IDAHO 83706	
Mgr ☐ Mem	MARILIN RUEB	3/01 W	LSTICK C	ecle Boise	E, IDAHO 83704	
Mgr Mem Mgr Mem Mgr Mem Mgr Mem Mgr Mem Mgr Mem	CATHY BALLARD  JANET EVANS		se Lane Shoes DR	-	ERA-J DOLO 838 L, FDAHO 83862	
Mgr Mem Mgr Mem Mgr Mem Mgr Mem						
(5) Signature: (7) Type/Print Nam	e: DIANE 5 KEND	Alick excle	(6) Date: (8) Title:	9/14/20 MNAGING MC	0 20 Em B & 2	

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.