



## 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

Phone: (208) 334-2300

Sign and date this form and return to the address provided above.

For Office Use Only

B0930-8961

## -FILED-

File #: 0005970569

Date Filed: 11/4/2024 10:46:00 AM

SOS Control Number: 38571	Filing Status: Inactive-Dissolved	l (Administrative)	124
Limited Liability Company (D)	Date Formed: 12/10/1998	Formation Locale: ID	
Name and Mailing Address: ORCHARD ROAD LLC PO BOX 396 BOISE, ID 83701-0396	(1) Ada	d or Change Mailing Address:	0:46 AM
	e Registered Office address must be a physical Idah	nange RA and/or RO Address:	Received by O
(3) New Registered Agent (RA)		bove, the new agent must sign here to accept the appo	<u> </u>
(4) Limited Liability Companies: Ente These will not be accepted. Changes Manager/Member Name	r names and addresses of Managers OR Member here will not affect the entity mailing address. If r	rs. Do NOT put 'same as last year' or 'same more space is needed, please add an attach  City, State, Zip	as ab <b>6</b> ve'.
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Mgr Mem	v Swanson " chael Methige "		the Idaho Se
Mgr Mem			U.
(5) Signature:	>		etary