



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.				Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 516073 Filin		Filing Status: Inactive-D	Status: Inactive-Dissolved (Administrative)		202
Limited Liability Company (D) Da		Date Formed: 08/16/201	6 Formation	n Locale: ID	
Name and Mailing Address: INDEPENDENT TARPING LLC			(1) Add or Change M	ge Mailing Address:	
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1540 E 3900 N					7
BUHL, ID 833°	10-0100				PM
Registered Agent (RA) and Registered Office (RC LUIS CAMPA		fice (RO) Address:	(2) Change RA and/o	or RO Address:	υ 0
3900 N 1540 E			1540 E 3	3.900 N	Ë
BUHL, ID 833			,500 = -		ceived
	Note: The Pogistore	d Office address must be a phy	reical Idaho addrees (no	a noetal hov)	Λq
(3) New Regist	tered Agent (RA) Signature		isical luano address (iic	postal box).	н
(0) 11011 110910	torou Agont (101) oignaturo		item (2) above, the new ag	ent must sign here to accept the appointm	nent 🛡
(4) Limited Liabili These will not be	ty Companies: Enter names and accepted. Changes here will no	d addresses of Managers OR ot affect the entity mailing add	Members. Do NOT p lress. If more space is	ut 'same as last year' or 'same as needed, please add an attachme	nt. 👸
Manager/Member	Name	Business Addre	SS	City, State, Zip	9
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(5) Signature:	UIS COMPO		(6) Date: 7 / 13	121	<u>e</u>
(5) Signature: LUIS Cam Pa (6) Date: 7/13/2/ (7) Type/Print Name: LUIS Cam Pa (8) Title: 11 cm 5cr / 12 pm 1bc					<u>.</u>

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.

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