



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form to:

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Idaho Secretary of State Attn: Reinstatements 450 North 4th Street

Reinstatement fee: \$30.00.				Boise, ID 83720 Phone: (208) 334-2300		
SOS Control Number: 46646			Filing Status: Inactive-Dissolved (Administrative)			1
Limited Liability Company (D)		Dat	ate Formed: 01/03/2000 Formati		on Locale: ID	
Name and Mai	iling Address:		(1)	Add or Change Mailir	ng Address:	C
HARRIS GRAI	N & STORAGE, A	A LIMITED LIABIL	ITY COMPANY			F
DAVID R HARI						•
10101 S OLD H						1
MALAD CITY,	ID 83252-6575					1
Desistered Ass	ent (DA) and Ba	relatored Office (PO) Address: (2	Change RA and/or R	O Address:	
DAVID R HARI		gistered Office (RO) Address. (4)	Change IVA and/or IV	o Address.	•
10101 S OLD I						
MALAD, ID 83252						(
•						<u> </u>
	Note:	The Registered Offic	e address must be a physical	daho address (no po	stal box).	
(3) New Regis	tered Agent (RA) Signature:	Thurs Ho	no		
	•		a new agent is appointed in item (2	2) above, the new agent	must sign here to accept the appoin	itment.
These will not be	accepted. Change		ct the entity mailing address.		same as last year' or 'same a eded, please add an attachm	ent.
Manager/Member Mgr Mem	Name	1/04=21	Business Address	12 Hwy 19.1	City, State, Zip	3252
Mgr Mem	DUVIA	Harris	10101 South a	10 Hary 19,1	MIHIRA ILA B.	
Mgr Mem	Sharen	Harris	Some 45	20005		
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MgrMem						
(5) Signature:	muid	2 Han	(6)	Date: 4-22	- 20	
(7) Type/Print Nam	e: Davi	d R. H	Arris (8)	Date: 4-27 Title: Nork	yen	
		m above. Enclose a de address provided al	check made payable to the Ida	ho Secretary of State	for \$30.00.	