



Idaho Limited Liability Company Reinstatement Form

File online at: sos.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			
		Filing Sta	ng Status: Inactive-Dissolved					2
		Date Form	med: 01/28/20	005	Formation	Locale: ID		19
Name and Mai NORTH CREE 4311 W HOLM BOISE, ID 837	K BUILDING CO., LLC ES ST			(1) Add or	Change Mailir	ng Address:		8:45 AM
Registered Agent (RA) and Registered Office (RO) Addr DANIEL L COOMBS 4311 W HOLMES ST				(2) Change RA and/or RO Address:				Rece
BOISE, ID 837)	ived by ID
(4) Limited Liabili These will not be	ty Companies: Enter nam accepted. Changes here	es and addresses will not affect the e	of Managers O entity mailing ac	R Members.	Do NOT put '	must sign here to accept same as last year' c eded, please add a	or 'same as above	_
Manager/Member	Name	В	ısiness Addr	ess		City, State, Zip		Ó
Mgr	GERRI E. C Emma M. (Daniel L. (Comps	3652 N. 3652 N. 4311 W.	Jullion V Jullion Holmes		Boise, ID Boise, ID	83704 83706	tany of State Lawe
(5) Signature: (6) Date: 5/29/19 (7) Type/Print Name: Daniel L Coambs (8) Title: member								0.000
(7) Type/Print Nam	e: Danie L L gibly complete the form above		made neverble 4-	(8) Title:				i C

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.

Country