Lawerence Denney





## **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

SOS Control Number: 3336731 Limited Liability Company (D)		Fili	Filing Status: Inactive-Dissolved (Administrative)				
			ate Formed: 10/18	•	mation Locale:	ID	
3528 HAWTHO	AT AND AUTO UP	HOLSTERY L.I	C.	(1) Add or Char	nge Mailing Address	3:	
Registered Ag WAYNE ROSE 3528 HAWTHO POCATELLO,	DRNE RD ID 83201			,,,	and/or RO Address		
(3) New Regis	Note: Th : tered Agent (RA)	•	ce address must be	ı physical Idaho addre:	ss (no postal box).		
(-,	, ,		If a new agent is appoin	ed in item (2) above, the r	new agent must sign h	nere to acce	pt the appointment
(4) Limited Liabili	ty Companies: Ente	r names and add	lresses of Managers	ed in item (2) above, the resources OR Members. Do Naddress. If more spa	OT put 'same as	last year	or 'same as abov
(4) Limited Liabili These will not be Manager/Member	ty Companies: Ente accepted. Changes	r names and add here will not affe	dresses of Managers ect the entity mailing Business Ad	OR Members. Do N address. If more spa	OT put 'same as ace is needed, ple	last year	or 'same as abov an attachment.
(4) Limited Liabili These will not be  Manager/Member  Mgr   Mem   Mgr   Mem	ty Companies: Ente accepted. Changes	r names and add	dresses of Managers ect the entity mailing	OR Members. Do N address. If more spa	OT put 'same as lace is needed, ple	last year'	or 'same as abov an attachment.
(4) Limited Liabili These will not be  Manager/Member  Mgr Mem	ty Companies: Ente accepted. Changes	r names and add here will not affe	Business Ad	dress If more spa	OT put 'same as ace is needed, ple	last year's ease add a	or 'same as aboven attachment.

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