



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 For Office Use Only

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File #: 0005369022

Date Filed: 8/17/2023 10:20:00 AM

	Phone: (208) 334	-2300					
SOS Control Number: 4222777			Filing Status: Inactive-Dissolved (Administrative)				
Limited Liability Company (D)			te Formed	: 03/30/2021	Formation	on Locale: ID	
Name and Mai Swanson Enter PO BOX 4656 KETCHUM, ID	prise LLC				(1) Add or Change Ma	ailing Address:	
Registered Ag Jeffrey D Swan 104 HILLSIDE KETCHUM, ID	son DRIVE 83340	Registered Office			(2) Change RA and/o		
(4) Limited Liabili These will not be	tered Agent (I	Enter names and add	If a new agent resses of M ect the entity	is appointed in ite lanagers OR M mailing addre	nm (2) above the new ago lembers. Do NOT po ss. If more space is	ent must sign here to accept the appointment ut 'same as last year' or 'same as above'. needed, please add an attachment.	
				ess Address		City, State, Zip	
Mgr ☐ Mem	Jeffrey	Swarson	104	Hillside	prive	Ketchum, ID 88540	
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(5) Signature:	effrey 5	wanson			(6) Date: 08/15/2	023	
(7) Type/Print Name: Jeffrey Swanson					(8) Title: Owner and Manager		

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.