



Idaho Limited Partnership Reinstatement Form

File online at: sos.idaho.gov

Return completed form to 2

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Denney

Idaho Secretary of State Attn: Reinstatements 450 North 4th Street Roise ID 83720

Reinstatem	ent fee: \$30.00.	450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300
SOS Control Number: 452	Filing Status: Inactive-Ter	
Limited Partnership (D)	Date Formed: 05/24/1982	Formation Locale: ID
Name and Mailing Address: SMALL RANCHES 23 SMALL RANCH LANE DUBOIS, ID 83423		(1) Add or Change Mailing Address:
Registered Agent (RA) and Regis NO AGENT AGENT RESIGNED OR INVALID BOISE, ID 83702 (ADA)	tered Office (RO) Address:	(2) Change RA and/or RO Address: KEV!W SM ALL 753 MeD. CineloDge RA DUBOIS JOANO 834123
Note: The	Registered Office address must be a physic	ical Idaho addrose (no nostal hov)
(3) New Registered Agent (RA) Si		can idano/address (no postar box).
		om (2) above, the new agent must sign here to accept the appointme
		NOT put 'same as last year' or 'same as above'. These will be space is needed, please add an attachment.
Name	Business Address	City, State, Zip
Kevin R Small	753 Medicine Lodge	e Road Dubois, ID 83423 💢
Fred "Butch" Small	14 Small Ranch Lan	ne Dubois, ID 83423
		0
		90 00 00 00
(5) Signature:	Sall	(6) Date: 12 1 - 19
(7) Type/Print Name: Kevin R Sma		(8) Title: Partner

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.