Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

Return completed form to:
Idaho Secretary of State
Attn: Reinstatements
450 North 4th Street
Boise, ID 83720
Phone: (208) 334-2300

Reinstatement fee: $30.00.

SOS Control Number: 448661 Filing Status: Inactive-Dissolved (Administrative)
Limited Liability Company (D) Date Formed: 02/05/2015 Formation Locale: ID

Name and Mailing Address:
TRACI'S BEST L.L.C.
10097 KINGDOM LN
NAMPA, ID 83686-9126

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:
TRACI BROCK
2918 E OHIO AVE
NAMPA, ID 83686

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature: _____
If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
☒ Mgr ☐ Mem	Traci Brock	10097 Kingdom Ln	Nampa, Id 83686
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(5) Signature: Traci Brock (6) Date: 8/3/20

(7) Type/Print Name: Traci Brock (8) Title: 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.