



Idaho Limited Liability Company Reinstatement Form

File online at: sosbiz.idaho.gov

For Office Use Only
Return completed form to:
Idal -FILED - tate

Attn: Reinstatements
File #: 0005086048
450 ΝΟΓΙΠ 4ΙΠ Street
Date Filed: 1/30/2023 1:39:00 PM

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| | Reinstaten | nent fee: \$30.00. | | | Phone: (208) 334-2300 | , <u> </u> |
|--|-------------------------------|--------------------|------------------------|--|---|--------------------------------|
| SOS Control N | Number: 118506 Company (D) | _ | Status: Inactive-D | | | |
| Name and Mai RODRIGUEZ (8985 BOWMO NAMPA, ID 83 | CONSTRUCTION, L NT RD | LC RAE | Gonstruction | (1) Add or Change | Change Mailing Address: | |
| Registered Ag SALVADOR RO 8985 BOWMO NAMPA, ID 83 | NT RD | stered Office (RC |)) Address: | (2) Change RA and | l/or RO Address: | FM Kecelve |
| (4) Limited Liabili | tered Agent (RA) S | ignature: | ses of Managers OR | item (2) above, the new Members. Do NOT | no postal box). agent must sign here to accept the appropriate or 'same as last year' or 'same is needed, please add an atta | Hne as above'. ⊢ |
| Manager/Member Mgr Mem Mgr Mem | Name Salva | | Business Addres | | City, State, Zip | 8686 0+ the Lambo wecher |
| (5) Signature: (6) | | | | (6) Date: | 1 | |
| (7) Type/Print Name: | | | | (8) Title: 0 w n c V | | |
| Instructional Is | aible commists the form o | hovo England a she | ale mada navabla ta ti | ha Idaha Sacratani ai | State for \$30.00 | Н |

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.