



Idaho Limited Liability Company Reinstatement Form

File online at: sos.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: 237915

Filing Status: Inactive-Dissolved

Limited Liability Company (D)

Date Formed: 06/17/1997

Formation Locale: ID

Name and Mailing Address:

BEAR LAKE POWELL LIMITED LIABILITY COMPANY
PO BOX 410336
BIG WATER, UT 84741

(1) Add or Change Mailing Address:

1615 TARGHEE ST.
MTN. HOME ID.
83647

Registered Agent (RA) and Registered Office (RO) Address:

NO AGENT
AGENT RESIGNED OR INVALID
BOISE, ID 83702 (ADA)

(2) Change RA and/or RO Address:

KIM WOLFLEY
1615 TARGHEE ST.
MTN. HOME ID. 83647

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

(3) New Registered Agent (RA) Signature:

Kim Wolfley

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
<input checked="" type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	KIM WOLFLEY	1615 TARGHEE ST.	MTN. HOME ID. 83647
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(5) Signature:

Kim Wolfley

(6) Date:

12-4-19

(7) Type/Print Name:

KIM WOLFLEY

(8) Title:

MGR. - MEMBER

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.

B0423-2944 12/20/2019 10:50 AM Received by ID Secretary of State Lawrence Denney