



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 Phone: (208) 334-2300

For	Office	Use	Only
, 0,	011100	000	~,,,,

-FILED-

File #: 0005970549

Date Filed: 11/4/2024 10:46:00 AM

					2
SOS Control N	lumber: 65957	Filing Status: Inactive-	Dissolved (Adminis	strative)	024
Limited Liability Company (D)		Date Formed: 12/11/20	01 Form	ation Locale: ID	
Name and Mai	iling Address:		(1) Add or Change	e Mailing Address:	2
	OPERTIES LLC				
PO BOX 396					on
BOISE, ID 837	701-0396				ΔМ
D		T . (00) A	(A) Charasa BA as	-1/ BO Add	77 0
STEVE C SWA	jent (RA) and Registered Of	tice (RO) Address:	(2) Change RA ai	nd/or RO Address:	Q M
4208 EDGEMO					ceive
BOISE, ID 837					e
					<u>σ</u>
					Λq
	Note: The Registered	d Office address must be a ph	ysical Idaho address	(no postal box).	
(3) New Regis	tered Agent (RA) Signature	•			<u> </u>
		If a new agent is appointed	in item (2) above, the new	v agent must sign here to a	cept the appointment
	ity Companies: Enter names an accepted. Changes here will no Name		ldress. If more spac		d an attachment. O
Mgr Mem	STEVE C. SLIAN		CEMOUS ST		Ta Van
Mgr Mem	C ANTREID SWA		EFICIA 33	20	60 65/0G
Mgr ☐Mem	MARYLMICHATA	a roll - t	25 21	31	11 4 0
Mgr Mem	1,47				
Mgr Mem					H
Mgr Mem					<u> </u>
Mgr Mem					
Mgr Mem					
Mgr Mem					
Mgr Mem					<u>Q</u>
Mgr Mem					<u>P</u>
	400				ê
(5) Signature:	Dan Com		(6) Date:	11/7/24	
(7) Type/Print Nan	ne: STEVE C	JUANSON	(8) Title:	ICA	0
				 	H ₁
	gibly complete the form above. End		the Idaho Secretary	of State for \$30.00.	ស្
sign and date thi	s form and return to the address pro	viueu adove.			-