



Idaho Corporation 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

Reinstatement fee: \$30.00.				450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300		
SOS Control Number: 298382		Filing Status: Inactive-		nation Locales ID	7 2 1	
		Date Formed: 09/16/19		nation Locale: ID	<u> </u>	
Name and Mailing Address: BROOKS EXCAVATION INC.			(1) Add or Change Mailing Address:		F	
	ESHOE BEND RD		0000APV000A-2 -		-	
BOISE, ID 83	714				C	
					;	
		ed Office (RO) Address:	(2) Change RA a	(2) Change RA and/or RO Address:		
LARRY D BRO	DOKS ESHOE BEND RD		V V V V V V V V V V V V V V V V V V V		(
BOISE, ID 83					H	
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	Market The Dec				{	
		istered Office address must be a ph	ysical Idano address	(no postal box).	N	
(3) New Regis	stered Agent (RA) Sign		n item (2) above, the ne	w agent must sign here to accept the appointme	ent.	
(4) Corporations:	Enter names and business a	ddresses (with zip code) of the Preside	-		7	
Title	Name Business Address		City, State, Zip		—	
Hesiduo	Donna Broo	US 9762N.Hors	eshoe Buok	Boise, Id. 83714		
Agent	Larry Brook	S 9762 N. Hors	e dece Bentle	Borse Sd. 83714		
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(5) Board of Direct	L ctors names and business add	ress (with zip code). Attach additional	sheet if necessary.			
Name Business Address /				City, State, Zip		
Louga Evools 9		97102N HOSSES	live Bend	Rd Bows Ad 83	7/4	
Forry brooks 97		9762 N. Horsesh	re Bud Rd	130 ise Id. 8371	4/	
				/		
					t	
						
 						
L/		/				
(5) Signature:	Louva	Drooles	(6) Date:	21-2020 President	t	
(7) Type/Print Nan	ne: DONDADA	Brooks	(8) Title:	President		