



# FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed)

For Office Use Only

**-FILED-**

File #: 0003918126

Date Filed: 6/29/2020 1:29:00 PM

1. The name of the entity is: Edgemere Dialysis, LLC
2. The name which it shall use in Idaho is: \_\_\_\_\_  
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:
 

<input type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust
<input type="checkbox"/> Other: _____ (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)	
4. Jurisdiction of formation: Delaware  
(Pick the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:  
2000 16th Street, Attn: JLD/SecGovFin, Denver, CO 80202  
(Street Address)  
601 Hawaii Street, Attn: JLD/SecGovFin, El Segundo, CA 90245  
(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:  
 \_\_\_\_\_  
(Street Address)  
 \_\_\_\_\_  
(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:  
 \_\_\_\_\_  
(Address)
8. Name and street address of registered agent in Idaho:  
Corporation Service Company, 12550 W. Explorer Drive, Suite 100, Boise, ID 83713  
(Name and Address)
9. The name, capacity, and mailing address of at least one governor:
 

<u>Total Renal Care, Inc.</u>	<u>Managing Member</u>	<u>2000 16th Street, Attn: JLD/SecGovFin, Denver, CO 80202</u>
<small>(Name)</small>	<small>(Capacity)</small>	<small>(Address)</small>
_____	_____	_____
<small>(Name)</small>	<small>(Capacity)</small>	<small>(Address)</small>

Secretary of State use only

Typed Name: Stephanie N. Berberich

Signature: \_\_\_\_\_

Capacity: Assistant Secretary of Total Renal Care, Inc.

# Delaware

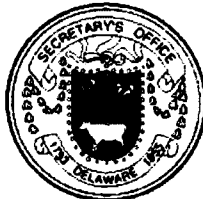
The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EDGEMERE DIALYSIS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF JUNE, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EDGEMERE DIALYSIS, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JUNE, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



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SR# 20205934682

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203183783

Date: 06-26-20

B0520-0012 06/29/2020 1:29 PM Received by ID Secretary of State Lawrence Denney