

State of Idaho

Office of the Secretary of State

CERTIFICATE OF REGISTRATION

OF

ACCOUNTING SOLUTIONS, INC

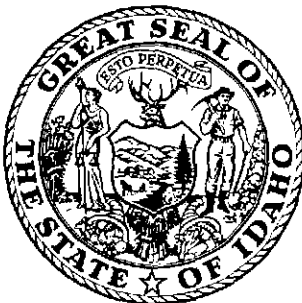
dba ACCSOLUTIONS INC

File Number C 206986

I, LAWRENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: August 24, 2015



Lawrence Denney
SECRETARY OF STATE

By *Beatty*



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00.

Complete and submit the form in duplicate.

FILED EFFECTIVE

2015 AUG 24 AM 10:01

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the entity is: Accounting Solutions, Inc
2. The name which it shall use in Idaho is: AccSolutions Inc
3. Select the type of entity you wish to register:
- | | |
|--|--|
| <input checked="" 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 type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust |
| <input type="checkbox"/> Other: _____ | |
4. Jurisdiction of formation: Tennessee
5. The address of its principal office is:
- | | | | |
|--------------------------------------|----------------|-----------|--------------|
| <u>113 East Magnesium Rd, Unit D</u> | <u>Spokane</u> | <u>WA</u> | <u>99208</u> |
|--------------------------------------|----------------|-----------|--------------|
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:
- | | | | |
|----------------------------------|-------------------|-----------|-------------------|
| <u>3095 E Andrew Johnson Hwy</u> | <u>Greenville</u> | <u>TN</u> | <u>37745-0961</u> |
|----------------------------------|-------------------|-----------|-------------------|
7. The mailing address to which correspondence should be addressed, if different from item 5, is:
- | | | | |
|-------------------|---------------------|-----------|--------------|
| <u>PO Box 633</u> | <u>Priest River</u> | <u>ID</u> | <u>83856</u> |
|-------------------|---------------------|-----------|--------------|
8. Name and street address of registered agent in Idaho:
- | | | | | |
|---------------------|-----------------------------|---------------------|-----------|--------------|
| <u>Shawna Emery</u> | <u>5809 Hwy 2 Suite 101</u> | <u>Priest River</u> | <u>ID</u> | <u>83856</u> |
|---------------------|-----------------------------|---------------------|-----------|--------------|
9. The name, capacity, and mailing address of at least one governor:
- | | | | | | |
|---------------------|------------------|--------------------------------------|---------------------|-----------|--------------|
| <u>Shawna Emery</u> | <u>President</u> | <u>PO Box 633</u> | <u>Priest River</u> | <u>ID</u> | <u>83856</u> |
| <u>Allen Ringer</u> | <u>Secretary</u> | <u>113 East Magnesium Rd, Unit D</u> | <u>Spokane</u> | <u>WA</u> | <u>99208</u> |

Typed Name: Shawna Emery

Signature: [Signature] 8/18/15

Capacity: President

Secretary of State use only

IDAHO SECRETARY OF STATE

08/25/2015 05:00

CK:20105 CT:308888 BH:1489561

1@ 100.00 = 100.00 FOR REG ST #2

C20105986



STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

SHAWNA EMERY
PO BOX 633
PRIEST RIVER, ID 83856

July 7, 2015

Request Type: Certificate of Existence/Authorization
Request #: 0168487

Issuance Date: 07/07/2015
Copies Requested: 1

Document Receipt

Receipt #: 002138451
Payment-Credit Card - State Payment Center - CC #: 163463248
Filing Fee: \$22.25
\$22.25

Regarding: Accounting Solutions, Inc
Filing Type: For-profit Corporation - Domestic
Formation/Qualification Date: 08/29/2014
Status: Active
Duration Term: Perpetual
Business County: GREENE COUNTY

Control #: 770016
Date Formed: 08/29/2014
Formation Locale: TENNESSEE
Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Accounting Solutions, Inc

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has not filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Verification #: 012701112

Processed By: Cert Web User