



0005896150

**STATE OF IDAHO***Office of the secretary of state, Phil McGrane***FOREIGN REGISTRATION STATEMENT (BUSINESS CORPORATION)**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00

*For Office Use Only***-FILED-**

File #: 0005896150

Date Filed: 9/10/2024 11:50:18 AM

## Filing Fee

Selected Service Type: Standard (filing fee \$100)

## 1. The name this business corporation will use in Idaho is:

Type of Corporation

Foreign Professional Business Corporation

Entity name

Journey Clinical Psychiatry, P.C.

The name of the business corporation in its home jurisdiction as shown on the attached certificate of existence/good standing:  
Journey Clinical Psychiatry, P.C.Upload or Mail a one page PDF of a Certificate of  
Existence/Good Standing from the home jurisdiction dated  
within 90 days of today.

## Profession

The business is organized to practice the profession of:

Medicine

## 2. Home Jurisdiction

The jurisdiction of formation is:

NEW YORK

## 3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Street Address

300 WEST 72 STREET  
#1D  
NEW YORK, NY 10023

## 4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Mailing Address

300 WEST 72 STREET  
#1D  
NEW YORK, NY 10023

## 5. The complete street address of the principal office is:

Principal Office Address

300 WEST 72 STREET  
#1D  
NEW YORK, NY 10023

## 6. The mailing address of the principal office is:

Mailing Address

300 W 72ND ST  
APT 1D  
NEW YORK, NY 10023-2661

## 7. Registered Agent Name and Address

Registered Agent

C T CORPORATION SYSTEM  
Commercial Registered Agent

Physical Address

1555 W SHORELINE DR  
STE 100  
BOISE, ID 83702

Mailing Address

1555 W SHORELINE DR  
STE 100  
BOISE, ID 83702☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

## 8. Governors



Name	Title	Address
Kyle A Lapidus, M.D.	President	300 WEST 72 STREET #1D NEW YORK, NY 10023

Signature of individual authorized by the entity to sign:

<i>Kyle A Lapidus, M.D.</i>	<i>09/10/2024</i>
Sign Here	Date

Job Title: President

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** JOURNEY CLINICAL PSYCHIATRY, P.C.  
**DOS ID Number:** 5988009  
**Entity Type:** DOMESTIC PROFESSIONAL SERVICE CORPORATION  
**Entity Status:** EXISTING  
**Date of Initial Filing with DOS:** 04/13/2021  
  
**Statement Status:** CURRENT  
**Statement Due Date:** 04/30/2025

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State,  
at the City of Albany, on September 05, 2024 at 08:38 A.M.

WALTER T. MOSLEY  
Secretary of State

BRENDAN C. HUGHES  
Executive Deputy Secretary of State

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