



0006166457

**STATE OF IDAHO***Office of the secretary of state, Phil McGrane***FOREIGN REGISTRATION STATEMENT (LIMITED LIABILITY COMPANY)**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$100.00

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

File #: 0006166457

Date Filed: 3/24/2025 12:49:24 PM

Foreign Registration Statement (Limited Liability Company)

Select one: Standard, Expedited or Same Day Service (see descriptions below) Expedited (+\$40; filing fee \$140)

1. The name this limited liability company will use in Idaho is:

Type of Limited Liability Company Foreign Limited Liability Company
Entity name Adventure Medics, LLC
Adventure Medics, LLC

2. Home Jurisdiction

The jurisdiction of formation is: OREGON

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

Street Address 62980 BOYD ACRES RD.
STE 7
BEND, OR 97701

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

Mailing Address 62980 BOYD ACRES RD
STE 7
BEND, OR 97701-8290

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

Principal Office Address 62980 BOYD ACRES RD.
STE 7
BEND, OR 97701

6. The mailing address of the principal office is:

Mailing Address 62980 BOYD ACRES RD
STE 7
BEND, OR 97701-8290

7. Registered Agent Name and Address

Registered Agent NORTHWEST REGISTERED AGENT LLC
Commercial Registered Agent
Physical Address
784 S CLEARWATER LOOP STE B
POST FALLS, ID 83854
Mailing Address
784 S CLEARWATER LOOP STE B
POST FALLS, ID 83854

☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

8. Governors

Name	Title	Address
Matt Sabelman	Member	62980 BOYD ACRES RD STE 7 BEND, OR 97701-8290

Signature of individual authorized by the entity to sign:



Matt Sabelman

03/24/2025

Sign Here

Date

Job Title: CEO

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State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 4943577

I, TOBIAS READ, SECRETARY OF STATE and Custodian of the Seal of said State, do hereby certify:

ADVENTURE MEDICS, LLC

is

Organized

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.

In Testimony Whereof, I have hereunto
set my hand and affixed hereto the
Seal of the State of Oregon.



A handwritten signature in black ink, appearing to read "Tobias Read".

TOBIAS READ, SECRETARY OF STATE

Issued Date: 3/20/2025



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