



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 #: 0006190812

Date Filed: 3/24/2025 3:33:00 PM

| The name which it shall use in | ldaho is: Mount | tain Shadow Arms, Inc. | |
|--|---|--|--|
| | | (Enter a name here, only if you are required to adopt an alternate came) | |
| Select the type of entity you w | _ | | |
| Business Corporation | | eral Partnership | |
| □ Nonprofit Corporation | | eral Cooperative Association | |
| ☐ Limited Liability Partnership | ☐ Limit | ted Partnership (Including a limited liability limited partnership | |
| ☐ Limited Liability Company | ☐ Statu | utory Trust, Business Trust, or Common-law Business Trust | |
| Other: | | | |
| | • | er" only if your foreign entity type is not listed above, and enter the type here.) | |
| Jurisdiction of formation: Spot | | | |
| The address of its principal off | | de the domestic jurisdiction where the entity was formed) | |
| 6484 N. Villier Rd., Nine Mile I | | | |
| (Straat Address) | | | |
| (Mailing Arktress, if different) | | | |
| | ringinal office (if | aguired by the laws of the jurisdiction of formation) is: | |
| · | • | equired by the laws of the jurisdiction of formation) is: | |
| 6484 N. Villier Rd. Nine Mile F | alls, VVA 99026 | | |
| (Baddingda) | | | |
| | | | |
| (Mailing Address, if different) | | | |
| | correspondence s | should be addressed, if different from item 5, is: | |
| | correspondence s | should be addressed, if different from item 5, is: | |
| | correspondence s | should be addressed, if different from item 5, is: | |
| The mailing address to which | | | |
| The mailing address to which (Address) | egistered agent <u>in</u> | n Idaho: | |
| The mailing address to which of the following address to which of the following address of real following address to which of the following address to the following a | egistered agent <u>in</u> | n Idaho: | |
| The mailing address to which (Address) Name and street address of re Eric H. Behlke 6009 West Self (Name and Address) | egistered agent <u>in</u> tice Way #F Post I | n <u>Idaho</u> : Falls, ID 83854 | |
| The mailing address to which (Address) Name and street address of re Eric H. Behlke 6009 West Self (Name and Address) The name, capacity, and mailing | egistered agent <u>in</u> tice Way #F Post I ng address of at le | n <u>Idaho</u> : Falls, ID 83854 least one governor: | |
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Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

MOUNTAIN SHADOW ARMS, INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 02/21/2009.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 03/21/2025 UBI Number: 602 901 647

LR Hobbie



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State

Date Issued: 03/21/2025