







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney 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 #: 0004383253

Date Filed: 8/24/2021 11:29:40 AM

| Foreign Registration Statement (Limited Liability Company) | | |
|---|--|--|
| Select one: Standard, Expedited or Same Day Service (see descriptions below) | Standard (filing fee \$100) | |
| 1. The name this limited liability company will use in Idaho is: | | |
| Type of Limited Liability Company | Foreign Limited Liability Company | |
| Entity name | Lakeside Equipment Leasing, LLC | |
| Lakeside Equipment Leasing, LLC | | |
| 2. Home Jursidiction | | |
| The jurisdiction of formation is: | WASHINGTON | |
| 3. The street address of its domestic principal office (if required by the laws of the | • | |
| Street Address | 717 W SPRAGUE AVE | |
| | STE 800 SPOKANE, WA 99201 | |
| | <u> </u> | |
| 4. The mailing address of its domestic principal office (if required by the laws of the | • | |
| Mailing Address | None | |
| 5. The complete street address of the principal office is: | | |
| Principal Office Address | 717 W SPRAGUE AVE. | |
| | STE 800 | |
| | SPOKANE, WA 99201 | |
| 6. The mailing address of the principal office is: | | |
| Mailing Address | 717 W SPRAGUE AVE | |
| | STE 800 SPOKANE, WA 99201-3911 | |
| | SPORANE, WA 99201-0911 | |
| 7. Registered Agent Name and Address | | |
| Registered Agent | Registered Agent | |
| | Josh Hemmingson Physical Address: | |
| | 1859 N LAKEWOOD DR | |
| | STE 200 | |
| | COEUR D ALENE, ID 83814 | |
| | Mailing Address: | |
| | 1859 N LAKEWOOD DR | |
| | STE 200 COEUR D ALENE, ID 83814-2636 | |
| | OOLON D ALLINE, 10 000 17-2000 | |
| I affirm that the registered agent appointed has consented to | o serve as registered agent for this entity. | |
| | | |
| 8. Governors | | |

8. Governors

| Name | Title | Address |
|-----------------|---------|---|
| John Hemmingson | Owner | 1859 N LAKEWOOD DR STE 200 COEUR D ALENE, ID 83814-2636 |
| Melissa Wells | Manager | 1859 N LAKEWOOD DR STE 200 COEUR D ALENE, ID 83814-2636 |

Signature of individual authorized by the entity to sign:



| | <i>08/24/2021</i> |
|-----------|-------------------|
| Sign Here | Date |
| | |

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Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

LAKESIDE EQUIPMENT LEASING, LLC

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 09/18/2013.

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: 08/24/2021 UBI Number: 603 334 391



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

Kim Wyman, Secretary of State

Date Issued: 08/24/2021