







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 #: 0004985392

Date Filed: 11/8/2022 3:15:04 PM

Foreign Registration Statement (Limited Liability Company) Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$100)
The name this limited liability company will use in Idaho is:	
Type of Limited Liability Company	Foreign Limited Liability Company
Entity name	Revive Mental Wellness LLC
Revive Mental Wellness LLC	
2. Home Jurisdiction	
The jurisdiction of formation is:	WYOMING
3. The street address of its domestic principal office (if required by the laws of the	ne jurisdiction of formation) is:
Street Address	1309 COFFEEN AVE
	STE 1200
	SHERIDAN, WY 82801
4. The mailing address of its domestic principal office (if required by the laws of	,
Mailing Address	1309 COFFEEN AVE
	STE 1200
	SHERIDAN, WY 82801
5. The complete street address of the principal office is:	
Principal Office Address	1309 COFFEEN AVE
	STE 1200
	SHERIDAN, WY 82801
6. The mailing address of the principal office is:	
Mailing Address	REVIVE MENTAL WELLNESS
	1200 N MAIN ST # 1623
	MERIDIAN, ID 83680-5065
7. Registered Agent Name and Address	
Registered Agent	ALL DAY \$49 IDAHO REGISTERED AGENT LLC

	Physical Ad

Physical Address

Commercial Registered Agent

784 S CLEARWATER LOOP STE F

POST FALLS, ID 83854

Mailing Address

784 S CLEARWATER LOOP STE F

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
Jynnah Snow	Manager	1309 COFFEEN AVE STE 1200 SHERIDAN, WY 82801-5777

Signature of individual authorized by the entity to sign:

te



jynnah snow	11/08/2022
Sign Here	Date
Job Title: Manager	

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STATE OF WYOMING Office of the Secretary of State

I, KARL ALLRED, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

Revive Mental Wellness LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 7**, **2022**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2022-001181267**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 8th day of November, 2022 at 3:12 PM. This certificate is assigned ID Number 056329428.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.