



0005283713

**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 #: 0005283713

Date Filed: 6/21/2023 10:56:40 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

Montana Agency Alliance LLC

Montana Agency Alliance LLC

## 2. Home Jurisdiction

The jurisdiction of formation is:

MONTANA

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

Street Address

410 CENTRAL AVENUE STE 612  
GREAT FALLS, MT 59401

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

Mailing Address

410 CENTRAL AVENUE STE 612  
GREAT FALLS, MT 59401

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

Principal Office Address

410 CENTRAL AVE, STE 612  
GREAT FALLS, MT 59404

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

Mailing Address

410 CENTRAL AVE  
STE 612  
GREAT FALLS, MT 59401-3128

## 7. Registered Agent Name and Address

Registered Agent

REGISTERED AGENT SOLUTIONS, INC.  
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
Timothy F Carlson	Manager	410 CENTRAL AVE STE 612 GREAT FALLS, MT 59401-3128

Signature of individual authorized by the entity to sign:



*Timothy F. Carlson*

*06/21/2023*

Sign Here

Date

Job Title: Manager



## CERTIFICATE OF EXISTENCE

I, **CHRISTI JACOBSEN**, Secretary of State for the State of Montana, do hereby certify that:

### **Montana Agency Alliance LLC**

duly filed its **Articles of Organization for Domestic Limited Liability Company** in this office on **May 9, 2019**, and on that date was authorized to transact business in this state **for a term of perpetual duration**.

Payment is reflected in the records of the Secretary of State for all fees owed to the Secretary of State.

The most recent annual report has been filed with this office.

No articles of dissolution have been placed on the record in this office by said limited liability company and the records indicate the limited liability company is in good standing under the laws of the State of Montana.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on the tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 14th day of June, 2023.

*Christi Jacobsen*

**Christi Jacobsen**  
Montana Secretary of State

Certificate Number: 41606520