



0005834182

**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 #: 0005834182

Date Filed: 7/31/2024 2:33:16 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 Strive Pharmacy Missouri LLC
Strive Pharmacy Missouri 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 jurisdiction of formation) is:

Street Address None

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

Mailing Address None

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

Principal Office Address 784 S. CLEARWATER LOOP STE B
POST FALLS, ID 83854

6. The mailing address of the principal office is:

Mailing Address 784 S. CLEARWATER LOOP STE B
POST FALLS, ID 83854

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
Nathan Hill	Member	784 S CLEARWATER LOOP STE B POST FALLS, ID 83854-9599

Signature of individual authorized by the entity to sign:

Nathan Hill

Sign Here

07/31/2024

Date



Job Title: Member

STATE OF WYOMING
Office of the Secretary of State

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

Strive Pharmacy Missouri LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **June 27, 2024**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2024-001481606**.

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 18th day of July, 2024 at 7:48 AM. This certificate is assigned ID Number 074486432.



A handwritten signature in cursive script that reads "Chuck Gray".

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.