







## STATE OF IDAHO

## Office of the secretary of state, Lawerence Denney FOREIGN REGISTRATION STATEMENT (BUSINESS CORPORATION)

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0004120218

Address

HENRY BENNETT 401 SHERMAN ST SPOKANE, WA 99202

HENRY BENNETT

401 S SHERMAN ST SPOKANE, WA 99202

Date Filed: 1/6/2021 1:18:45 PM

| Foreign Registration Statement (Business Corporation)  Select one: Standard, Expedited or Same Day Service (see descriptions below) | Expedited (+\$40; filing fee \$140)  |
|---|--|
| The name this business corporation will use in Idaho is:  |  |
| Type of Corporation   | Foreign Business Corporation   |
| Entity name   | Inland Northwest Orthotics and Prosthetics, Inc.   |
| The name of the business corporation in its home jurisdiction as s Inland Northwest Orthotics and Prosthetics, Inc.                 | hown on the attached certificate of existence/good standing:   |
| Upload or Mail a one page PDF of a Certificate of Existence/Good Standing from the home jurisdiction dated within 90 days of today  |  |
| 2. Home Jursidiction  |  |
| The jurisdiction of formation is:   | WASHINGTON   |
| The street address of its domestic principal office (if required by the laws of the juing Street Address                            | risdiction of formation) is: HENRY BENNETT 401 S SHERMAN ST SPOKANE, WA 99202  |
| 4. The mailing address of its domestic principal office (if required by the laws of the j   | urisdiction of formation) is:  |
| Mailing Address   | HENRY BENNETT<br>401 S SHERMAN ST<br>SPOKANE, WA 99202   |
| The complete street address of the principal office is:   |  |
| Principal Office Address  | HENRY BENNETT<br>401 S SHERMAN ST<br>SPOKANE, WA 99202   |
| 6. The mailing address of the principal office is:  |  |
| Mailing Address   | HENRY BENNETT<br>401 S SHERMAN ST<br>SPOKANE, WA 99202-6001  |
| 7. Registered Agent Name and Address  |  |
| Registered Agent  | Registered Agent Henry L Bennett Physical Address: 8920 N HESS STREET HAYDEN, ID 83835 Mailing Address: 8920 N HESS ST HAYDEN, ID 83835-9183 |
| ☐ I affirm that the registered agent appointed has consented to     ☐ 8. Governors  | ·  |

Title

President

Vice-President

Name

Henry L Bennett

James F Cahill



| Signature of individual authorized by the entity to sign: |            |
|---|------------|
|   |            |
|   |            |
| Henry L Bennett   | 01/06/2021 |
| Sign Here   | Date       |
|   |            |
|   |            |
| Job Title: President                                      |            |



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** 

## INLAND NORTHWEST ORTHOTICS AND PROSTHETICS, 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 08/07/2000.

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:

01/06/2021

**UBI Number:** 

602 056 141



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

Kim Wyman, Secretary of State

Date Issued: 01/06/2021