





STATE OF IDAHO Office of the secretary of state, Phil McGrane STATEMENT OF QUALIFICATION OF LIMITED

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

LIABILITY PARTNERSHIP

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

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Statement of Qualification of Limited Liability Partnership Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$100)
Limited Liability Partnership Name	
Type of Limited Liability Partnership	Professional Limited Liability Partnership
Entity name	Practicing Differently PLLP
Limited Liability Partnership Designation	
By checking this box and filing this document with the Seclimited liability partnership.	cretary of State, the partnership named herein elects to be a
Profession	
The business is organized to practice the profession of:	Psychology
The complete street address of the principal office is:	
Principal Office Address	100 W OVERLAND RD SUITE 201 MERIDIAN, ID 83642
The mailing address of the principal office is:	
Mailing Address	100 W OVERLAND RD
	STE 201 MERIDIAN, ID 83642-3053
Street address of an office in this State:	
Address	None
Registered Agent Name and Address	
Registered Agent	Registered Agent
	Angel Ford
	Physical Address: 100 W OVERLAND RD SUITE 201
	MERIDIAN, ID 83642
	Mailing Address:
	100 W OVERLAND RD
	STE 201
	MERIDIAN, ID 83642-3053
☑ I affirm that the registered agent appointed has consented.	d to serve as registered agent for this entity.
6. Signature of individual authorized by partners to sign:	
Angel Ford	03/06/2023
Sign Here	
Sign nere	Date
Job Title: Manager	
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