



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typ) Date Filed: 5/19/2021 12:07:00 PM

For Office Use Only

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File #: 0004287161

| | The name of the entity is: Max R The name which it shall use in Ida | ho ie: | | |
|----|--|--|--|--|
| • | The name which it shall use in Ida | | (Enter a name here, only if you are required to adopt an alternate name) | |
| | Select the type of entity you wish to register: | | | |
| | ☐ Business Corporation | | ral Partnership | |
| | ☐ Nonprofit Corporation | ☐ Gene | ral Cooperative Association | |
| | ☐ Limited Liability Partnership | | ed Partnership (Including a limited liability limited partnership | |
| | Limited Liability Company | | tory Trust, Business Trust, or Common-law Business Trust | |
| | ☐ Other: | | • | |
| | · | (Use "Other" | only if your foreign entity type is not listed above, and enter the type here.) | |
| | Jurisdiction of formation: Washir | ngton | | |
| | | (Provide | e the domestic jurisdiction where the entity was formed) | |
| | The address of its principal office i | | 20040 | |
| | 16803 37th Drive SE Bothel | i, Washingto | on 98012 | |
| | (Street Address) | | | |
| | (Mailing Address, if different) | | | |
| | The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is: | | | |
| | 222.222 2 admirate principal armore (in regulate by the lettre of the jurisdiction of formation) to | | | |
| | /O(| | | |
| | (Street Address) | | | |
| | (Mailing Address, if different) | | | |
| | (Ma ling Address, if different) | espondence st | hould be addressed, if different from item 5, is: | |
| 3. | (Ma ling Address, if different) | espondence sł | hould be addressed, if different from item 5, is: | |
| • | (Maling Address, if different) The mailing address to which corre | <u></u> | | |
| | (Ma ling Address, if different) The mailing address to which corre [Address] Name and street address of regist Registered Agent Solutions, | tered agent <u>in l</u> | | |
| | (Maling Address, if different) The mailing address to which correct (Address) Name and street address of regist | tered agent <u>in l</u> | <u>Idaho</u> : | |
| | (Maling Address, if different) The mailing address to which corre (Address) Name and street address of regist Registered Agent Solutions, (Name and Address) | tered agent <u>in l</u> , Inc. 92 | <u>Idaho</u> : 21 S. Orchard Suite G, Boise, ID 83705 | |
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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

MAX RESTAURANT LLC

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 07/08/2012.

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: 05/18/2021 UBI Number: 603 220 963



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

Kim Wyman, Secretary of State

Kin Ulgna

Date Issued: 05/18/2021