







## STATE OF IDAHO

# Office of the secretary of state, Lawerence Denney FOREIGN REGISTRATION STATEMENT (LIMITED LIABILITY COMPAN \_FILED-

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

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

For Office Use Only

File #: 0003758077

Date Filed: 1/30/2020 3:20:27 PM

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		Kris Cavin Insurance and Financial Services, LLC
Kris Cavin Insurance and Financial Se	ervices, LLC	
Home Jurisdiction     The jurisdiction of formation is:		WASHINGTON
The street address of its domestic principal office (if required by the laws of the justice of the street Address)		urisdiction of formation) is: KRIS CAVIN 212 NE 4TH AVE CAMAS, WA 98607
The mailing address of its domestic principal office (if required by the laws of the j Mailing Address		jurisdiction of formation) is: KRIS CAVIN 212 NE 4TH AVE CAMAS, WA 98607
5. The complete street address of the principal of	fice is:	
Principal Office Address		KRIS CAVIN 212 NE 4TH AVE CAMAS, WA 98607
6. The mailing address of the principal office is:		
Mailing Address		KRIS CAVIN 212 NE 4TH AVE CAMAS, WA 98607-2124
7. Registered Agent Name and Address		
Registered Agent		Registered Agent DEAN L CAMERON Physical Address: 700 W STATE ST. FL. 3 BOISE, ID 83720 Mailing Address: 700 W STATE ST FL 3
		BOISE, ID 83702-5868
8. Governors		,
Name	Title	Address
KRIS CAVIN	MEMBER	KRIS CAVIN 212 NE 4TH AVE CAMAS, WA 98607-2124



Signature of individual authorized by the entity to sign:			
KRIS CAVIN	02/04/2020		
Sign Here	Date		
Job Title: MEMBER			



I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

## **CERTIFICATE OF EXISTENCE**

**OF** 

## KRIS CAVIN INSURANCE AND FINANCIAL SERVICES, 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 03/04/2013.

**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: 02/04/2020 UBI Number: 603 281 893



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

Kim Wyman, Secretary of State

Date Issued: 02/04/2020