

# State of Idaho

Office of the Secretary of State

## CERTIFICATE OF REGISTRATION

OF

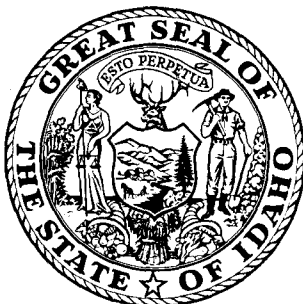
JM CARE PLAN, INC.

File Number C 211176

I, LAWRENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: September 26, 2016



*Lawrence Denney*  
SECRETARY OF STATE

By *Sally Bertie*

202



# FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2016 SEP 26 PM 3:03

 SECRETARY OF STATE  
 STATE OF IDAHO

- The name of the entity is: JM Care Plan, Inc.
- The name which it shall use in Idaho is: \_\_\_\_\_  
(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  
☐ Nonprofit Corporation  
☐ Limited Liability Partnership  
☐ Limited Liability Company  
☐ Other: \_\_\_\_\_  
 (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)  
☐ General Partnership  
☐ General Cooperative Association  
☐ Limited Partnership (Including a limited liability limited partnership)  
☐ Statutory Trust, Business Trust, or Common-law Business Trust
- Jurisdiction of formation: Wisconsin  
(Provide the domestic jurisdiction where the entity was formed)
- The address of its principal office is:  
24 Jewelers Park Drive Neenah, WI 54956  
 (Street Address)  
 \_\_\_\_\_  
 (Mailing Address, if different)
- The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:  
24 Jewelers Park Drive Neenah, WI 54956  
 (Street Address)  
 \_\_\_\_\_  
 (Mailing Address, if different)
- The mailing address to which correspondence should be addressed, if different from item 5, is:  
Same as item 5  
 (Address)
- The name of the registered agent and street address of registered agent in Idaho:  
Corporation Service Company, 12550 W. Explorer Drive, Suite 100, Boise, ID 83713  
 (Name) (Address)
- The name, capacity, and mailing address of at least one governor:  

<u>Bryon Nelson</u> (Name)	<u>Vice President</u> (Capacity)	<u>24 Jewelers Park Drive, Neenah, WI 54956</u> (Address)
<u>Mark Willson</u> (Name)	<u>Secretary</u> (Capacity)	<u>24 Jewelers Park Drive, Neenah, WI 54956</u> (Address)

Signature:

Typed Name: Bryon NelsonCapacity: Vice President

Secretary of State use only

IDAHO SECRETARY OF STATE

09/26/2016 05:00

CK:4234606 CT:172099 BH:1548020

1@ 100.00 = 100.00 FOR REG ST #2

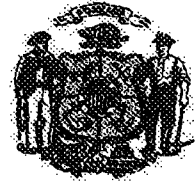
1@ 20.00 = 20.00 EXPEDITE C #3

C211174

United States of America  
State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, DAVID DUECKER, Deputy Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

**JM CARE PLAN, INC.**

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is March 18, 2016.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on August 24, 2016.

A handwritten signature in black ink, appearing to read "David Duecker".

DAVID DUECKER, Deputy Administrator  
Division of Corporate and Consumer Services  
Department of Financial Institutions

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>

Enter this code: **184468-DF4FEA38**