







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney FOREIGN REGISTRATION STATEMENT (LIMITED LIABILITY COMPANY)

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

-FILED-

File #: 0004734467

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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

Neighborhood Care, LLC

Neighborhood Care, LLC

2. Home Jurisdiction

The jurisdiction of formation is:

WASHINGTON

3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Street Address

LISA LAKIN 15515 E. TALLMAN RD. CHATTAROY, WA 99003

4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Mailing Address

LISA LAKIN

15515 E. TALLMAN RD. CHATTAROY, WA 99003

5. The complete street address of the principal office is:

Principal Office Address

15515 E. TALLMAN RD. CHATTAROY, WA 99003

6. The mailing address of the principal office is:

Mailing Address

LISA LAKIN

15515 E TALLMAN RD

CHATTAROY, WA 99003-8576

7. Registered Agent Name and Address

Registered Agent

Registered Agent Tana R Vanderholm Physical Address: TANA VANDERHOLM 201 E 2ND ST. N

OLDTOWN, ID 83822
Mailing Address:
TANA VANDERHOLM

201 E 2ND ST N

OLDTOWN, ID 83822-8587

I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

8. Governors

Name	Title	Address
Lisa D Lakin	Member	15515 E TALLMAN RD CHATTAROY, WA 99003-8576
Drew T Lakin	Member	15515 E TALLMAN RD CHATTAROY, WA 99003-8576



Daniel P Lakin	Member	15515 E TALLMAN RD CHATTAROY, WA 99003-8576
Chad K Lakin	Member	511 E C ST DEER PARK, WA 99006-6071
Danielle C Lakin	Member	511 E C ST DEER PARK, WA 99006-6071

Signature of individual	authorized	by the	entity to	sign:
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Lisa D Lakin	05/23/2022
Sian Here	Date

Job Title: Manager; Owner; Governor; Member

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I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

NEIGHBORHOOD CARE, 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 04/26/2022.

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: 05/23/2022 UBI Number: 604 903 389



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

Steve R. Hobbs, Secretary of State

Date Issued: 05/23/2022