



0004674159

**STATE OF IDAHO***Office of the secretary of state, Lawrence 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 #: 0004674159

Date Filed: 4/13/2022 12:04:49 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      Recovery Exchange, LLC  
Recovery Exchange, LLC

## 2. Home Jurisdiction

The jurisdiction of formation is:      WYOMING

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

Street Address      201 E 5TH ST SUITE 1205  
SHERIDAN, WY 82801

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

Mailing Address      201 E 5TH ST SUITE 1205  
SHERIDAN, WY 82801

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

Principal Office Address      201 E 5TH ST SUITE 1205  
SHERIDAN, WY 82801

## 6. The mailing address of the principal office is:

Mailing Address      201 E 5TH ST  
STE 1205  
SHERIDAN, WY 82801-3658

## 7. Registered Agent Name and Address

Registered Agent      INCORP SERVICES, INC.  
Commercial Registered Agent  
Physical Address  
1310 S VISTA AVE STE 28  
BOISE, ID 83705  
Mailing Address  
1310 S VISTA AVE STE 28  
BOISE, ID 83705

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

## 8. Governors

Name	Title	Address
Travis Colwell	Member	201 E 5TH ST STE 1205 SHERIDAN, WY 82801-3658
Adam Kazmark	Member	201 E 5TH ST STE 1205 SHERIDAN, WY 82801-3658

Signature of individual authorized by the entity to sign:



*Travis Colwell*

*04/13/2022*

Sign Here

Date

Job Title: Member

**STATE OF WYOMING**  
**Office of the Secretary of State**

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

**Recovery Exchange, LLC**  
is a  
**Limited Liability Company**

formed or qualified under the laws of Wyoming did on **October 22, 2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2019-000881694**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 24th day of March, 2022 at 12:22 PM. This certificate is assigned ID Number 050807922.



  
Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <https://wyobiz.wyo.gov> and following the instructions displayed under Validate Certificate.