



FOREIGN REGISTRATION STATEMENT

-FILED-

For Office Use Only

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EJ LJ

Title 30, Chapter 21, Idaho Code

e Filing fee: \$100.00 + \$20.00 for manual processing (form must be typ Date Filed)

File #: 0005406050

Date Filed: 9/14/2023 12:11:00 PM

The name which it shall use	in Idaho is: Lewiston-Clarkston Partners Habitat for Humanity, Inc.	ľ
	(Enter a name here, only if you are required to adopt an alternate name)	. P.
Select the type of entity you		ě:
☐ Business Corporation	☐ General Partnership	P
Nonprofit Corporation	☐ General Cooperative Association	4:
☐ Limited Liability Partnersh		§
☐ Limited Liability Company	Statutory Trust, Business Trust, or Common-law Business Trust	ij
Other:		99
	(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)	4.
Jurisdiction of formation: CI	arkston, WA	5.
	(Provide the domestic jurisdiction where the entity was formed)	E.
The address of its principal of		je -uj
	sement B, Clarkston WA 99403	-0) 81
(Street Address) PO Box 317 Clarkston,	WA 99403	f.
(Mailing Address, if different)		Ī,
	main air all affice (if an arrived by the large of the invited lating of formation) in	ř.
The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:		ij,
(Street Address)	sement B, Clarkston WA 99403	-
PO Box 317, Clarkston WA	00403	ŀ
(Mailing Address it different)		17
	Landard Control of the Control of th	
_	h correspondence should be addressed, if different from item 5, is:	E.
PO Box 317 Clarkston (Address)	WA 99403	ië.
		in in
Name and street address of	•	0
Jim Piscitello, ReStore	Manager, 1633 G Street, Lewiston, ID 83501	Port
(Name and Address)		
The name, capacity, and ma	ailing address of at least one governor:	E.
	Eexcutive Director 1242 Highland Ave, Basement B, Clarkston WA 99403	4.,,
Deborah J Snyder	(Capacity) (Address)	
Deborah J Snyder		100 to 10
		f Par
(Name)	(Canacita) (Adduce)	41
	(Capacity) (Address) Secretary of State use only	1
(Name)		
(Name)		
(Name)	Secretary of State use only	AC PARTY PROPERTY AND ADDRESS OF THE PARTY AND
(Name)	Secretary of State use only	
(Name) (Name)	Secretary of State use only	i i i
(Name) (Name)	Secretary of State use only	
(Name) (Name) Typed Name: Deborah J S	Secretary of State use only	

The State of Washington

Secretary of State

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

CERTIFICATE OF EXISTENCE

OF

LEWISTON-CLARKSTON PARTNERS HABITAT FOR HUMANITY

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 12/19/1990.

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: 09/08/2023 UBI Number: 601 291 610

R Hollie



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: 09/08/2023