







STATE OF IDAHO

Office of the secretary of state, Phil McGrane

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 #: 0005508786

Date Filed: 12/12/2023 11:03:31 AM

Foreign Registration Statement (Limited Liability Company) Select one: Standard, Expedited or Same Day Service (se descriptions below)		(see Standard (filing fee \$100)
1. The name this limited liability company w		
Type of Limited Liability Company		Foreign Limited Liability Company
Entity name		Kate Williams Therapy, LLC
Kate Williams Therapy, LLC		
2. Home Jurisdiction		
The jurisdiction of formation is:		OREGON
3. The street address of its domestic princip	oal office (if required by the la	•
Street Address		None
4. The mailing address of its domestic princ	cipal office (if required by the	laws of the jurisdiction of formation) is:
Mailing Address		None
5. The complete street address of the princ	ipal office is:	
Principal Office Address		784 S. CLEARWATER LOOP STE R
		POST FALLS, ID 83854
6. The mailing address of the principal offic	e is:	
Mailing Address	- 101	260 BONNER MALL WAY PMB 1024
, and the second		PONDERAY, ID 83852-9748
7. Registered Agent Name and Address		
Registered Agent		REGISTERED AGENTS INC
		Commercial Registered Agent
		Physical Address
		784 S CLEARWATER LOOP STE R POST FALLS, ID 83854
		Mailing Address
		784 S CLEARWATER LOOP STE R
		POST FALLS, ID 83854
I affirm that the registered ac	gent appointed has con	sented to serve as registered agent for this entity.
8. Governors		
Name	Title	Address
Kate Williams	Manager	784 S CLEARWATER LOOP
		STE R
		POST FALLS, ID 83854-9599

Kate Williams

Sign Here

Signature of individual authorized by the entity to sign:

12/12/2023

Date



Job Title: Manager

State of Oregon

OFFICE OF THE SECRETARY OF STATE

Corporation Division

Certificate of Existence 2317378

I, LAVONNE GRIFFIN-VALADE, SECRETARY OF STATE and Custodian of the Seal of said State, do hereby certify:

KATE WILLIAMS THERAPY, LLC

is

Organized

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.

OF OREGON HEGON In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

Lavonne Orifin-Valade

LAVONNE GRIFFIN-VALADE, SECRETARY OF STATE

Issued Date: 12/12/2023



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