







## **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 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0003597379

Date Filed: 8/18/2019 12:47:13 PM

Foreign Registration Statement (Limited Liability Company)  Select one: Standard, Expedited or Same Day Service (see descriptions below)			Standard (filing fee \$100)
Ty Er	The name this limited liability company will use in Idaho Type of Limited Liability Company Entity name Vilson-Coghlan,L.L.C.	is:	Foreign Limited Liability Company Wilson-Coghlan,L.L.C.
Home Jurisdiction     The jurisdiction of formation is:			WASHINGTON
The street address of its domestic principal office (if required by the laws of the Street Address		uired by the laws of the juri	risdiction of formation) is:  MARILYN STONEBRAKER  910 VINELAND DR  UNIT 16  CLARKSTON, WA 99403
The mailing address of its domestic principal office (if required by the laws of the Mailing Address		equired by the laws of the ju	urisdiction of formation) is:  MARILYN STONEBAKER  910 VINELAND DR  UNIT 16  CLARKSTON, WA 99403
The complete street address of the principal office is:     Principal Office Address			MARILYN STONEBRAKER 910 VINELAND DR UNIT 16 CLARKSTON, WA 99403
6. T	The mailing address of the principal office is:		
Mailing Address			MARILYN STONEBRAKER 910 VINELAND DR UNIT 16 CLARKSTON, WA 99403-2126
7. Registered Agent Name and Address Registered Agent			GALE WILSON Registered Agent Physical Address 540 O CONNOR RD LEWISTON, ID 83501 Mailing Address
8. G	Governors		
	Name	Title	Address
	Marilyn Stonebraker	Governor	MARILYN STONEBRAKER 910 VINELAND DR UNIT 16 CLARKSTON, WA 99403-2126
	Gale Wilson	Governor	GALE WILSON 540 OCONNOR RD

LEWISTON, ID 83501-4531



Signature of individual authorized by the entity to sign:	
Marilyn Stonebraker	08/19/2019
Sign Here	Date
Signer's Title: Manager	



Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

## CERTIFICATE OF EXISTENCE

**OF** 

## WILSON-COGHLAN, L.L.C.

**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 12/19/2000.

**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: 08/18/2019 UBI Number: 602 085 038



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

Kim Wyman, Secretary of State

Date Issued: 08/18/2019