


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 #: 0004338826

Date Filed: 7/20/2021 9:41:08 AM

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

Anchored Occupational Therapy LLC

Anchored Occupational Therapy LLC

2. Home Jursidiction

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

 23903 E JOSEPH AVE
 OTIS ORCHARDS, WA 99027

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

Mailing Address

 23903 EAST JOSEPH AVENUE
 OTIS ORCHARDS, WV 99027

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

Principal Office Address

 23903 E JOSEPH AVE
 OTIS ORCHARDS, WA 99027

6. The mailing address of the principal office is:

Mailing Address

 23903 E JOSEPH AVE
 OTIS ORCHARDS, WA 99027-9777

7. Registered Agent Name and Address

Registered Agent

 Registered Agent
 Christi Shelley
 Physical Address:
 8152 NORTH WAYNE DRIVE
 HAYDEN, ID 83835
 Mailing Address:
 8152 N WAYNE BLVD
 HAYDEN, ID 83835-5031

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

8. Governors

Name	Title	Address
Christi Shelley	Manager	23903 E JOSEPH AVE OTIS ORCHARDS, WA 99027-9777

Signature of individual authorized by the entity to sign:

Christi Shelley

Sign Here

07/20/2021

Date

Job Title: Manager

UNITED STATES OF AMERICA

The State of Washington

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

ANCHORED OCCUPATIONAL THERAPY 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 07/08/2021.

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: 07/20/2021
UBI Number: 604 781 831

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



Kim Wyman, Secretary of State

Date Issued: 07/20/2021

