







STATE OF IDAHO Office of the secretary of state, Phil McGrane ANNUAL REPORT

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File #: 0005084246

Date Filed: 1/29/2023 3:03:53 PM

Entity Name and Mailing Address:

Entity Name: NORTH IDAHO MEMORY CLINIC, LLC

The file number of this entity on the records of the Idaho

Secretary of State is:

Address PO BOX 1551

HAYDEN, ID 83835-1551

0000533851

Entity Details:

Entity Status Active-Existing

This entity is organized under the laws of: IDAHO

If applicable, the old file number of this entity on the records of W176374

the Idaho Secretary of State was:

The registered agent on record is:

Registered Agent JOHN A WOLFE, PH.D.

Registered Agent

Physical Address

296 WEST SUNSET AVE, SUITE 15

COEUR D' ALENE, ID 83815

Mailing Address

PO BOX 1551

HAYDEN, ID 83835-1551

Limited Liability Company Managers and Members

Name	Title	Business Address
Susan Melchiore	Member	PO BOX 1551 HAYDEN, ID 83835
John Wolfe	Member	296 WEST SUNSET AVE STE 15 CDA, ID 83815
Brenda Roberts	Member	505 N. ARGONE STE B 108 SPOKANE VALLEY, WA 99212

The annual report must be signed by an authorized signer of the entity.

Job Title: Manager

Susan Melchiore 01/29/2023

Sign Here Date