



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 MAY 25 AM 9:08

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Julie Roberts RN, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

1535 Ridgeway Dr., Moscow, ID 83843

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Julie A. Roberts

(Name)

1535 Ridgeway Dr., Moscow, ID 83843

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Julie Roberts

1535 Ridgeway Dr., Moscow, ID 83843

5. Mailing address for future correspondence (annual report notices):

1535 Ridgeway Dr., Moscow, ID 83843

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Julie A Roberts

Typed Name:

Julie A. Roberts

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
05/25/2011 05:00
CK: 1811 CT: 259193 BH: 1275327
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