



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2015 DEC 31 PM 12:16

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Triton Home Health Care LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations "LLC" or "L.C.")

2. The complete street and mailing addresses of the principal office is:

331 E Ivy Glade St. Kuna, ID 83634

(Street Address)

(Mailing Address, if different)

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

Christa Covington

331 E Ivy Glade St Kuna, ID 83634

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Christa Covington

331 E. Ivy Glade St Kuna, ID 83634

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

331 E. Ivy Glade St. Kuna, ID 83634

(Address)

Signature of organizer(s).

Printed Name: Christa Covington

Signature: Christa Covington

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/31/2015 05:00

CK:161 CT:290627 BH:1506459

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