







## STATE OF IDAHO Office of the secretary of state, Phil McGrane **CERTIFICATE OF ORGANIZATION 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 #: 0006049513

01/06/2025

Date

Date Filed: 1/6/2025 8:32:16 AM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day S descriptions below)	service (see Expedited (+\$40; filing fee \$140)
1. Limited Liability Company Name	
Type of Limited Liability Company	Professional Limited Liability Company
Entity name	STRIDE Rehabilitation Center for Pets PLLC
Profession	
The business is organized to practice the profess	sion of: Veterinary Medicine
2. The complete street address of the principal office is:	
Principal Office Address	609 N. MIDLAND BLVD.
	NAMPA, ID 83651
3. The mailing address of the principal office is:	
Mailing Address	609 N MIDLAND BLVD
	NAMPA, ID 83651-6525
4. Registered Agent Name and Address	
Registered Agent	Registered Agent
	MEGAN LeFAVE Physical Address:
	609 N. MIDLAND BLVD.
	NAMPA, ID 83651
	Mailing Address:
	609 N MIDLAND BLVD NAMPA, ID 83651-6525
	NAMPA, ID 03031-0323
☑ I affirm that the registered agent appointed h	as consented to serve as registered agent for this entity.
5. Governors	
Name	Address
MEGAN LeFAVE	609 N. MIDLAND BLVD. NAMPA, ID 83651
JEFF BROURMAN	2888 E. WINDSONG DRIVE BOISE, ID 83712

Signature of Organizer:

MEGAN LeFAVE

Sign Here