

Signature:

## **AMENDMENT TO CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

**FILED EFFECTIVE** 

2016 OCT 11 AM 10: 11

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$30.00.

SECRETARY OF STATE STATE OF IDAHO

Complete and submit the application in duplicate

Complete and Submit the application in <u>duplicate</u> .	
The name of the limited liability company is:     Magic Valley Midwifery, LLC	
2. The date the certificate of organization was original	ally filed : August 19, 2016
<ol> <li>The name of the limited liability company is amend BirthLight Midwifery, LLC</li> </ol>	ded to:
4. The complete street and mailing addresses of the	principal office is amended to:
(Street Address)	
(Mailing Address, if different)	
5. The mailing address for future correspondence (a	nnual reports) is amended to:
(Address)	
6. The name and address of the managers/members	s shall be amended as follows:
Add: Delete: (Name) (Address	s)
Add: Delete: Mame) (Address	5)
Add: Delete: Mame) (Address	s)
<ol> <li>Signature of a manager, member, or authorized pers</li> </ol>	SON. Secretary of State use only
Printed Name: LoriAnn B. Jones Signature: 1/2//2002 (18)	IDAHO SECRETARY OF STATE 10/11/2016 05:00 CK:1258 CT:328049 BH:1550052
Printed Name: Patrick P. Jones	16 30.00 = 30.00 ORGAN AMEN #2 16 20.00 = 20.00 EXPEDITE C #3
Signature:	w170679