







For Office Use Only

-FILED-

File #: 0005136107

Date Filed: 3/3/2023 5:12:45 PM

Amendment to Certificate of Organization of Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see

descriptions below)

The current name of the limited liability company is:

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

Secretary of State is:

Entity Type: Limited Liability Company Limited Liability Company **Entity Subtype:**

The date the certificate of organization was originally filed: 2023-01-15 20:53:55.600

Limited Liability Company Name

Your Butterfly Hospice LLC Entity name

2. The complete street address of the principal office is amended to:

Principal Office Address 404 E PINE AVE MERIDIAN, ID 83642

3. The mailing address of the principal office is amended to:

Mailing Address 404 E PINE AVE

MERIDIAN, ID 83642-2337

Expedited (+\$40; filing fee \$70)

Your Butterfly Hospice LLC

0005070876

4. Managers and Members

Name	Title	Address
■ Steven Casos Dr	Manager	2644 E ASPENWOOD CT EAGLE, ID 83616
MaKenna Foster	Manager	1050 N EDGEWOOD LN EAGLE, ID 83616
Michael Foster	Manager	1050 N EDGEWOOD LN EAGLE, ID 83616
Lynda Huddleston	Manager	1400 N OAK CREEK WAY MERIDIAN, ID 83642

Signature of Authorized Person:

STEVEN CASOS 03/03/2023

Sign Here Date

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