

W 746

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

DEC 29 8 41 AM '94
SECRETARY OF STATE
STATE OF IDAHO

To the Secretary of State of Idaho,
Statehouse, Boise, Idaho 83720



1. The name of the limited liability company is: Center for Physical Rehabilitation, L.L.C.

2. The address of the initial registered office is: 496 G Shoup Avenue West
Twin Falls, Idaho 83301 (not a PO Box) and the name of the initial registered agent at that address is: Julie A. Ellis

Signature of registered agent: Julie A. Ellis

3. The latest date certain on which the limited liability company will dissolve: 1/1/2040

4. Is management of the limited liability company vested in a manager or managers?
☐ Yes ☒ No (check appropriate box)

5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

Name:

Address:

Julie A. Ellis

496 G Shoup Ave. West, Twin Falls,
Idaho 83301

6. Signature of at least one person listed in #5 above:

Julie A. Ellis

Secretary of State use only

IDAHO SECRETARY OF STATE

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CK #: 4259 CUST# 26621

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