







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY **COMPANY**

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$100.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0003886518

Date Filed: 5/29/2020 5:55:44 PM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service descriptions below) | e (see Standard (filling fee \$100) |
|---|---|
| 1. Limited Liability Company Name | |
| Type of Limited Liability Company | Limited Liability Company |
| Entity name | Alpha Home Health L.L.C. |
| 2. The complete street address of the principal office is: | |
| Principal Office Address | 335 E MOSKEE ST MERIDIAN, ID 83646 |
| 3. The mailing address of the principal office is: | |
| Mailing Address | 335 E MOSKEE ST MERIDIAN, ID 83646-1928 |
| 4. Registered Agent Name and Address | |
| Registered Agent | Registered Agent |
| | Moise Kambaza Physical Address: |
| | 335 E MOSKEE ST |
| | MERIDIAN, ID 83646 |
| | Mailing Address: |
| | 335 E MOSKEE ST |
| _ | MERIDIAN, ID 83646-1928 |
| ☐ I affirm that the registered agent appointed has contained. | nsented to serve as registered agent for this entity. |
| 5. Governors | |
| Name | Address |
| MOISE KAMBAZA | 335 E MOSKEE ST MERIDIAN, ID 83646 |
| Signature of Organizer: | |
| Kijege Malick | 06/01/2020 |
| | : : |