







## 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 -FILED-

File #: 0005615826

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same descriptions below)	e Day Service (see	Standard (filing fee \$100)	
1. Limited Liability Company Name			
Type of Limited Liability Company		Professional Limited Liability Company	
Entity name		Dr. Facer Psychiatry PLLC	
Profession			
The business is organized to practice the profession of:		Medicine	
2. The complete street address of the principal office is	3:		
Principal Office Address		784 S. CLEARWATER LOOP	
		#8059 POST FALLS, ID 83854	
		FOST FALLS, ID 63634	
3. The mailing address of the principal office is:		70.4.0.01.EA.DWATER 1.000.#.0050	
Mailing Address		784 S CLEARWATER LOOP # 8059 POST FALLS, ID 83854-9599	
		1 331 171223, 13 3333 1 3333	
4. Registered Agent Name and Address		NORTHWEST RECISTERED ACENT II C	
Registered Agent		NORTHWEST REGISTERED AGENT LLC Commercial Registered Agent	
		Physical Address	
		784 S CLEARWATER LOOP STE B	
		POST FALLS, ID 83854	
		Mailing Address	
		784 S CLEARWATER LOOP STE B POST FALLS, ID 83854	
☑ I affirm that the registered agent apport	pinted has consented	to serve as registered agent for this entity.	
5. Governors			
Name		Address	
Kaden L Facer	784 S. CLEARWAT	ER LOOP	
	#8059   POST FALLS, ID 83	3854	
	1. 331 17(220, 12)		Ш
Signature of Organizer:			
Kaden L Facer		02/28/2024	
Sign Here		Date	_