



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2017 AUG -3 AM 8:53

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

PERFORMANCE CARE RX LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

4040 N. JULLION WAY BOISE ID 83704

(Street Address)

(Mailing Address, if different)

3. The name of the registered agent and the street address of the registered agent:

KALIAN EDWARD OSBORN 4040 N. JULLION WAY BOISE ID 83704

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

KALIAN EDWARD OSBORN 4040 N. JULLION WAY BOISE ID 83704

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

4040 N. JULLION WAY BOISE ID 83704

(Address)

Signature of organizer(s)

Signature: 

Printed Name: KALIAN EDWARD OSBORN

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

08/03/2017 05:00

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