



0004012913

**STATE OF IDAHO***Office of the secretary of state, Lawrence 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

*For Office Use Only***-FILED-**

File #: 0004012913

Date Filed: 9/28/2020 5:28:18 PM

| Certificate of Organization Limited Liability Company | | | | | |
|--|--|------|---------|------------------|--|
| Select one: Standard, Expedited or Same Day Service (see descriptions below) | Expedited (+\$40; filing fee \$140) | | | | |
| 1. Limited Liability Company Name | | | | | |
| Type of Limited Liability Company | Professional Limited Liability Company | | | | |
| Entity name | Lynn H. Woodland PT MS, PLLC | | | | |
| Profession | | | | | |
| The business is organized to practice the profession of: | Physical Therapy | | | | |
| 2. The complete street address of the principal office is: | | | | | |
| Principal Office Address | 2570 CHANNING WAY IDAHO FALLS, ID 83404 | | | | |
| 3. The mailing address of the principal office is: | | | | | |
| Mailing Address | 2570 CHANNING WAY IDAHO FALLS, ID 83404-7515 | | | | |
| 4. Registered Agent Name and Address | | | | | |
| Registered Agent | Registered Agent Lynn H. Woodland Physical Address: 2570 CHANNING WAY IDAHO FALLS, ID 83404 Mailing Address: 2570 CHANNING WAY IDAHO FALLS, ID 83404-7515 | | | | |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity. | | | | | |
| 5. Governors | | | | | |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>Lynn H. Woodland</td><td>2570 CHANNING WAY IDAHO FALLS, ID 83404</td></tr></tbody></table> | | Name | Address | Lynn H. Woodland | 2570 CHANNING WAY IDAHO FALLS, ID 83404 |
| Name | Address | | | | |
| Lynn H. Woodland | 2570 CHANNING WAY IDAHO FALLS, ID 83404 | | | | |
| Signature of Organizer: | | | | | |
| <i>Dean J. Parker</i> | <i>09/28/2020</i> | | | | |
| Sign Here | Date | | | | |

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