



0005899445

**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

For Office Use Only

-FILED-

File #: 0005899445

Date Filed: 9/12/2024 5:19:06 PM

Certificate of Organization Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see descriptions below) Standard (filing fee \$100)

1. Limited Liability Company Name

Type of Limited Liability Company

Professional Limited Liability Company

Entity name

McNally Mobile Care PLLC

Profession

The business is organized to practice the profession of:

Nursing

2. The complete street address of the principal office is:

Principal Office Address

5089 SE 1ST 1/2 AVE
NEW PLYMOUTH, ID 83655

3. The mailing address of the principal office is:

Mailing Address

5089 SE 1 1/2 AVE
NEW PLYMOUTH, ID 83655-5254

4. Registered Agent Name and Address

Registered Agent

Registered Agent

Crystal M McNally

Physical Address:

5089 SE 1ST 1/2 AVE
NEW PLYMOUTH, ID 83655

Mailing Address:

5089 SE 1 1/2 AVE
NEW PLYMOUTH, ID 83655-5254☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

5. Governors

Name	Address
Crystal M McNally	5089 SE 1 1/2 AVE NEW PLYMOUTH, ID 83655-5254

Signature of Organizer:

Crystal M. McNally

Sign Here

09/12/2024

Date