For Office Use Only

## -FILED-

File #: 0006100440

This statement of conversion is delivered in accordance with Section 30-22-403 of the Idaho Model Entity Transactions Act.

(1) The name, jurisdiction of formation, and type of entity of the converting entity is Community Nursing Services Inc., an Idaho corporation.

STATEMENT OF CONVERSION

- (2) The name, jurisdiction of formation, and type of entity of the converted entity is Community Nursing Services LLC, an Idaho limited liability company.
- (3) This statement of conversion will be effective upon filing.
- (4) The plan of conversion was approved in accordance with Section 30-22-403 of the Idaho Model Entity Transactions Act.
- (5) Attached hereto is the public organic record of the converted entity.

Community Nursing Services Inc.

Name: Je

Title: CEO





## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

		B0962-8485
P	CERTIFICATE OF ORGANIZATION	
	LIMITED LIABILITY COMPANY	2
jp	Title 30, Chapters 21 and 25, Idaho Code  Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).	06/2
		2
1.	The name of the limited liability company is:	025 1
	Community Nursing Services LLC	<u></u>
2.	(Remember to include the words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC  The complete street and mailing addresses of the principal office is:	) 20 60
	1499 Curlew Drive	
	(Street Address) Ammon, Idaho 83406-4764	
	(Mailing Address, if different)	
3.	The name and complete street address of the registered agent:	285 0
	Paul D. Ziel 770 S Woodruff Ave, Idaho Falls, ID 83401-5	
	(Name) (Address)	——— <u>Б</u>
4.	The name and address of at least one governor of the limited liability company:	ьy
	Andy Crossman 1497 Curlew Dr, Ammon, ID 83406  (Name) (Address)	
	Tony Whitaker 1497 Curlew Dr, Ammon, ID 83406	H P Q
	(Name) (Address)	
		О Н
	(Name) (Address)	
		ě
	(Name) (Address)	H
5.	Mailing address for future correspondence (annual report notices):	daho
	1499 Curlew Dr, Ammon, ID 83406 (Mailing Address)	
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Print	ted Name: Secretary of State use only	t ar y
Sign	nature:	4
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Print	ted Name:	<u>لا</u>
Sign	nature:	d d
Revised	d 12/2018	Ø