



# AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$30.00.

Complete and submit the application in duplicate.

**FILED EFFECTIVE**

2017 APR 19 AM 9:45

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:  
Health Exchange Advisers LLC
2. The date the certificate of organization was originally filed : 03/29/2013
3. The name of the limited liability company is amended to:  
Health Coverage Idaho LLC
4. The complete street and mailing addresses of the principal office is amended to:  
5952 S. Olmsted Ave Boise ID 83709  
(Street Address)  
PO Box 5161 Boise ID 83705  
(Mailing Address - if different)
5. The mailing address for future correspondence (annual reports) is amended to:  
PO Box 5191 Boise ID 83705  
(Address)
6. The name and address of the managers/members shall be amended as follows:
 

Add: <input type="checkbox"/>	Delete: <input type="checkbox"/>	Anna Aella	5952 S Olmsted Ave Boise ID 83709
		<small>(Name)</small>	<small>(Address)</small>
Add: <input type="checkbox"/>	Delete: <input type="checkbox"/>	Dianna Troudt	744 Cherry Lane Emmett ID 83617
		<small>(Name)</small>	<small>(Address)</small>
Add: <input type="checkbox"/>	Delete: <input type="checkbox"/>		
		<small>(Name)</small>	<small>(Address)</small>
7. Signature of a manager, member, or authorized person.
 

Printed Name: Dianna Troudt	<p style="text-align: center; font-size: small;">Secretary of State use only</p> <p style="text-align: center;">IDAHO SECRETARY OF STATE</p> <p style="text-align: center;">04/19/2017 05:00</p> <p style="text-align: center;">CK:157 CT:333879 HH:1579920</p> <p style="text-align: center;">1@ 30.00 = 30.00 ORGAN AMEN #2</p> <p style="font-size: large; text-align: center;">W123667</p>
Signature: <u>Dianna Troudt</u>	
Printed Name: _____	
Signature: _____	