





## **STATE OF IDAHO**

## Office of the secretary of state, Lawerence 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 #: 0004676533

Date Filed: 3/30/2022 12:27:01 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)	Same Day Service (+\$100; filing fee \$200)
1. Limited Liability Company Name	
Type of Limited Liability Company	Professional Limited Liability Company
Entity name	True North Mobile Medicine PLLC
Profession	
The business is organized to practice the profession of:	Medicine
2. The complete street address of the principal office is:	
Principal Office Address	REBEKAH SYVERSON
	623 E HARRISON AVE
	COEUR D'ALENE, ID 83814
3. The mailing address of the principal office is:	
Mailing Address	784 S CLEARWATER LOOP
	STE R POST FALLS, ID 83854-9599
	1 001 1 ALEO, 1D 00004-0000
4. Registered Agent Name and Address	
Registered Agent	ALL DAY \$49 IDAHO REGISTERED AGENT LLC Commercial Registered Agent
	Physical Address
	784 S CLEARWATER LOOP STE F
	POST FALLS, ID 83854
	Mailing Address
	784 S CLEARWATER LOOP STE F
	POST FALLS, ID 83854
☑ I affirm that the registered agent appointed has consented.	d to serve as registered agent for this entity.
5. Governors	
Name	Address
Brooke Kane 10088 N. M. HAYDEN, II	· · · · · · · · · · · · · · · · · · ·

623 E. HARRISON AVE COEUR D'ALENE, ID 83814

Rebekah Syverson

Signature of Organizer:

Sign Here

Rebekah Syverson

03/30/2022

Date