



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00.

Complete and submit the application in duplicate.

**FILED EFFECTIVE**

**2015 AUG 17 AM 11:00**

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

**Bell Healthcare Consulting, LLC**

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

**10453 Cayuse Way**

**Boise**

**ID 83714**

(Street Address)

(City)

(State)

(Zipcode)

(Mailing Address, if different)

(City)

(State)

(Zipcode)

3. The name and complete street address of the registered agent:

**Matthew Bell**

**10453 Cayuse Way**

**Boise**

**ID 83714**

(Name)

(Address)

(City)

(State)

(Zipcode)

4. The name and address of at least one governor of the limited liability company:

**Matthew Bell**

**10453 Cayuse Way**

**Boise**

**ID 83714**

(Name)

(Address)

(City)

(State)

(Zipcode)

(Name)

(Address)

(City)

(State)

(Zipcode)

(Name)

(Address)

(City)

(State)

(Zipcode)

(Name)

(Address)

(City)

(State)

(Zipcode)

5. Mailing address for future correspondence (annual report notices):

**10453 Cayuse Way**

**Boise**

**ID 83714**

(Address)

(City)

(State)

(Zipcode)

Signature of organizer(s).

Printed Name: MATTHEW BELL

Signature: [Handwritten Signature]

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

**08/17/2015 05:00**

CK:3123280 CT:172099 BH:1488199

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