## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

11 NOV 14 AMTI: 17

1. The name of the limited liability cor	mpany is: STATE OF IDAHO
Preventative Health Services, LLC	
2. The complete street and mailing ad	dresses of the initial designated office:
9238 W. Beachside Lane	-
(Street Address) Boise, ID 83714	
(Mailing Address, if different than street address)	
3. The name and complete street add	ress of the registered agent:
Danielle Bennion	9238 W. Beachside Lane Boise, ID 83714
(Name)	(Street Address)
The name and address of at least of company:	one member or manager of the limited liability
<u>Name</u>	Address
Danielle Bennion	9238 W. Beachside Lane Boise, ID 83714
5. Mailing address for future correspon	ndence (annual report notices):
9238 W. Beachside Lane, Boise, ID 8371	•
6. Future effective date of filing (option Signature of a manager, member or	nal):
person.	Secretary of State use only
Signature MMuur	
Typed Name: Danielle Bennion	
Signature	EDANO SECRETARY OF STATE
Typed Name:	

W 108282