

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

(Instructions on back of application)

11 JAN -5 AM 8:38

SECTION OF STATE

1.	The name of the limited liability of	company is:	STATE OF IDAHO
	Motherwise Midwifery, L.L.C.		
2.	The complete street and mailing addresses of the initial designated/principal office: 508 West Chestnut Street, Genesee, Idaho 83832  (Street Address)  (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Ken Nagy 508 West Chestnut Street, Genesee, Idaho 83832		t Street, Genesee, Idaho 83832
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name	Address	
	Nancy Draznin	508 West Chestnut Street, Genesee, Idaho 83832	
5	Mailing address for future correspondence (annual report notices):		
٠.	508 West Chestnut Street, Genesee, Idaho 83832		
6.	Future effective date of filing (optional):		
•	nature of a manager, member son.	or authorized	
pei	30II.		Secretary of State use only
Sig	nature		
Тур	ped Name: Nancy Drazylin		
			IDAHO SECRETARY OF STATE
Sig	nature		01/05/2011 05:00 CK: 1842 CT: 286646 BH: 1253853
Тур	oed Name:		1 E 100.90 = 100.00 CRGAN LLC # 2

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