



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED-EFFECTIVE**

2007 FEB 26 AM 10:30

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

IntegriCare of Eastern Idaho, LLC

2. The street address of the initial registered office is:

3470 Washington Parkway, Idaho Falls, ID 83404

and the name of the initial registered agent at the above address is:

Robert Collette

3. The mailing address for future correspondence is:

PO Box 3881, Idaho Falls, ID 83403-3881

4. Management of the limited liability company will be vested in:

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)

5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name	Address
<u>Aspen Home Health Private Duty</u>	<u>3470 Washington Parkway, Idaho Falls, ID</u>
<u>LLC</u>	<u>83404</u>
_____	_____
_____	_____
_____	_____
_____	_____

6. Signature of at least one person responsible for forming the limited liability company:

Signature: *Robert Collette*

Typed Name: Robert Collette

Capacity: President and Manager, for

Aspen Home Health Private Duty LLC

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

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

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Revised 07/2002

IDAHO SECRETARY OF STATE  
02/26/2007 05:00  
CK: 9111 CT: 162716 BH: 1035601  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

Web Form

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