



0005283280



STATE OF IDAHO
Office of the secretary of state, Phil McGrane
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 #: 0005283280

Date Filed: 6/14/2023 8:24:46 AM

Certificate of Organization Limited Liability Company	
Select one: Standard, Expedited or Same Day Service (see descriptions below)	Expedited (+\$40; filing fee \$140)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	OFF SHIFT NURSE LLC
2. The complete street address of the principal office is:	
Principal Office Address	784 S CLEARWATER LOOP STE B POST FALLS, ID 83854
3. The mailing address of the principal office is:	
Mailing Address	PO BOX 535 EAGLE, ID 83616-0461
4. Registered Agent Name and Address	
Registered Agent	NORTHWEST REGISTERED AGENT, LLC. Registered Agent Physical Address 784 S CLEARWATER LOOP STE B POST FALLS, ID 83854 Mailing Address
<input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.	
5. Governors	
Name	Address
CRISLOREN GRAJEDA	PO BOX 535 EAGLE, ID 83616-0461
ALEX GRAJEDA	PO BOX 535 EAGLE, ID 83616-0461
Signature of Organizer:	
<u>ALEX GRAJEDA</u>	<u>06/14/2023</u>
Sign Here	Date

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