CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2016 JUN 28 PM 2: 30

SECRETARY OF STATE

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>.

		STATE OF TOATIO
The name of the professional	fimited liability company is:	
Idaho Rehab PRN PLLC		
•	ng addresses of the principal office is	¢
768 N Nebula CT. Star I	D 83669	
(Street Address)		
768 N Nebula CT. Star I	D 83669	
(Mailing Address, if different)		
Name and street address of re	egistered agent <u>in Idaho</u> :	
James L Miller	768 N Nebula CT. Star ID 83669	
(Name)	(Address)	**************************************
The name and address of at l	least one governor of the limited liabi	ity company;
James L Miller	768 N Nebula CT. Star ID 83669	
(Name)	(akerbha)	
(Name)	(Address)	
(Nanie)	(Address)	
Mailing address for future cor	respondence (annual report notices):	
768 N Nebula CT. Star I		
(Address)		
t. more more a		
	s a professional company, and the pr ally authorized to render professiona	incipal profession or professions for which members are I services is:
	Physical Therapy	
Cinnature of a manager	member or an organizat	Secretary of State use only
Signature of a manager, i	nember, or an organizer.	IDAHO SECRETARY OF STATE

IDAHO SECRETARY OF STATE 06/28/2016 05:00

CK:3986876 CT:172099 BH:1535444 16 100.00 = 100.00 PROF LLC #2

W168583

Signature of a manager, member, or an organizer

Printed Name: James L Miller

Signature:

Printed Name:

Signature: _____

Rev. 08/2015