







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney 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 #: 0004426421

Date Filed: 9/23/2021 9:16:51 PM

Select one: Standard, Expedited or Same Descriptions below)	Day Service (see	Expedited (+\$40; filing fee \$140)
1. Limited Liability Company Name		
Type of Limited Liability Company		Limited Liability Company
Entity name		Relgnite Health NW, LLC
2. The complete street address of the principal office is:		
Principal Office Address		1869 E SELTICE WAY, #571
		POST FALLS, ID 83854
3. The mailing address of the principal office is:		
Mailing Address		1869 E SELTICE WAY # 571
		POST FALLS, ID 83854-7019
4. Registered Agent Name and Address		
Registered Agent		NORTHWEST REGISTERED AGENT LLC
		Commercial Registered Agent
		Physical Address
		784 S CLEARWATER LOOP STE B POST FALLS, ID 83854
		Mailing Address
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	ted has consented to	POST FALLS, ID 83854
5. Governors		POST FALLS, ID 83854 o serve as registered agent for this entity. Address
5. Governors Name	1869 E SEL	POST FALLS, ID 83854 o serve as registered agent for this entity.
5. Governors Name Melinda J Leonard	1869 E SEL POST FALL	POST FALLS, ID 83854 o serve as registered agent for this entity. Address TICE WAY, #571 S, ID 83854
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5. Governors Name Melinda J Leonard James D Leonard	1869 E SEL POST FALL 1869 E SEL	POST FALLS, ID 83854 o serve as registered agent for this entity. Address TICE WAY, #571 S, ID 83854 TICE WAY, #571
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