



0005695146

**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 #: 0005695146

Date Filed: 4/16/2024 11:23:28 PM

Certificate of Organization Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see descriptions below)      Standard (filing fee \$100)

1. Limited Liability Company Name

Type of Limited Liability Company

Limited Liability Company

Entity name

Rehab Extreme LLC

2. The complete street address of the principal office is:

Principal Office Address

128 VISTA DR  
POCATELLO, ID 83201

3. The mailing address of the principal office is:

Mailing Address

128 VISTA DR  
POCATELLO, ID 83201-5824

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

784 S CLEARWATER LOOP STE B  
POST FALLS, ID 83854☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

5. Governors

Name	Address
Bart W McDonald	128 VISTA DR POCATELLO, ID 83201

Signature of Organizer:

*Bart W McDonald*

Sign Here

*04/17/2024*

Date

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