







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

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File #: 0004715715

Date Filed: 4/25/2022 6:03:00 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day descriptions below)	ervice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Professional Limited Liability Company
Entity name	Fruitland Chiropractic PLLC
Profession The business is organized to practice the profes	on of: Chiropractic
2. The complete street address of the principal office is:	
Principal Office Address	2007 N WHITLEY DRIVE FRUITLAND, ID 83619
3. The mailing address of the principal office is:	
Mailing Address	2007 N WHITLEY DR FRUITLAND, ID 83619-2132
4. Registered Agent Name and Address	
Registered Agent	Registered Agent Taylor Mahler Physical Address: 320 SW 2ND STREET FRUITLAND, ID 83619 Mailing Address: 320 SW 2ND ST FRUITLAND, ID 83619-2574
■ I affirm that the registered agent appointed	s consented to serve as registered agent for this entity.
5. Governors	
Name	Address
	SW 2ND STREET JITLAND, ID 83619
Signature of Organizer:	
Taylor Mahler	04/25/2022
Sign Here	Date