



0004100258

**STATE OF IDAHO***Office of the secretary of state, Lawrence 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 #: 0004100258

Date Filed: 12/14/2020 5:32:13 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	Professional Limited Liability Company				
Entity name	Destination Occupational Therapy PLLC				
Profession					
The business is organized to practice the profession of:	Occupational Therapy				
2. The complete street address of the principal office is:					
Principal Office Address	3583 N. MCMULLEN DR. POST FALLS, ID 83854				
3. The mailing address of the principal office is:					
Mailing Address	3583 N MCMULLEN DR POST FALLS, ID 83854-0050				
4. Registered Agent Name and Address					
Registered Agent	Registered Agent MICHAEL E WILLIAMS Physical Address: 3583 N. MCMULLEN DR. POST FALLS, ID 83854 Mailing Address: 3583 N MCMULLEN DR POST FALLS, ID 83854-0050				
<input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.					
5. Governors					
<table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>MICHAEL E WILLIAMS</td><td>3583 N. MCMULLEN DR. POST FALLS, ID 83854</td></tr></tbody></table>		Name	Address	MICHAEL E WILLIAMS	3583 N. MCMULLEN DR. POST FALLS, ID 83854
Name	Address				
MICHAEL E WILLIAMS	3583 N. MCMULLEN DR. POST FALLS, ID 83854				
Signature of Organizer:					
<u>MICHAEL E WILLIAMS</u>	<u>12/14/2020</u>				
Sign Here	Date				

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