

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2016 FEB 19 AM R: 38

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

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		Complete and sub	mit the application in duplicate.	SECRETARY OF STATE STATE OF IDAHO	
1.	The name of the limited liability company is:			OF IDAHO	
	Pacific Health & Chiropractic, L.L.C.				
	(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)				
2.	The complete street and mailing addresses of the principal office is:				
		850 W. Ironwood Dr., Suite 302 Coeur d'Alene, ID 83814			
	(Street Addr	(058)		**************************************	
	(Mailing Add	tress, if different)			
3.	The name and complete street address of the registered agent:				
	Sonja L	. Burk	850 W. Ironwood Dr., Suite 302 Coeur d'Alene, ID 83814		
	(Name)		(Address)		
4.	The name and address of at least one governor of the limited liability company:				
	Sonja L. Burk 850 W. Ironwood Dr., Suite 302 Coeur d'Alene, ID 838		· · ·		
	(Nanie)		(Address)		
	(Name) (Address)				
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	(Name) (Address)				
	(Name)	(Name) (Address)			
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5.	Mailing address for future correspondence (annual report notices):				
		PO Box 3256 Coeur d'Alene, ID 83816			
	(Address)				
Sic	inatura of	organizar(a)			
Signature of organizer(s).				Secretary of State use only	
Pri	nted Name	e: Sonja L. Burk		IDAHO SECRETARY OF STATE	
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