



0005561285

**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 #: 0005561285

Date Filed: 1/13/2024 10:29:18 AM

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

RESTORE IV THERAPY PLLC

Profession

The business is organized to practice the profession of:

Medicine

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

Principal Office Address

1344 CODY COURT
TWIN FALLS, ID 83301

3. The mailing address of the principal office is:

Mailing Address

1344 CODY CT
TWIN FALLS, ID 83301-3290

4. Registered Agent Name and Address

Registered Agent

Registered Agent

Jacob C Larsen

Physical Address:

1344 CODY COURT
TWIN FALLS, ID 83301

Mailing Address:

1344 CODY CT
TWIN FALLS, ID 83301-3290☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

5. Governors

Name	Address
Jacob C Larsen	1344 CODY COURT TWIN FALLS, ID 83301

Signature of Organizer:

Jacob C Larsen

Sign Here

01/13/2024

Date

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