



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Filing fee: \$100 typed, \$120 not typed
Complete and submit the application in duplicate.

FILED EFFECTIVE

2015 SEP 29 AM 10: 28

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the professional limited liability company is:

Specialized Physical Therapy, PLLC

2. The complete street and mailing addresses of the principal office is:

1510 Golden Gate St Pocatello, ID 83201

(Street Address)

(Mailing Address, if different)

3. Name and street address of registered agent in Idaho:

Shawn Robert Higbee

1510 Golden Gate St Pocatello, ID 83201

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Shawn Robert Higbee

1510 Golden Gate St Pocatello, ID 83201

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

1510 Golden Gate St Pocatello, ID 83201

(Address)

6. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is:

Physical Therapy



7. Signature of a manager, member, or an organizer:

Printed Name: Shawn Higbee

Signature: [Signature]

Printed Name: _____

Signature: _____

Secretary of State use only

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09/29/2015 05:08

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