



**CERTIFICATE OF ORGANIZATION
PROFESSIONAL
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

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

R & R Therapy Plus PLLC

2. The complete street and mailing addresses of the initial designated office:

303 N. 12th Avenue Street Pocatello, ID 83201

(Street Address)

SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE
12 JAN 19 AM 9:16

3. The name and complete street address of the registered agent:

Angie Beck

(Name)

5148 Bannock Hwy Pocatello, ID 83204

(Street Address)

4. The name and address of at least one member or manager of the professional limited liability company:

Angie Beck

Name

5148 Bannock Hwy Pocatello, ID 83204

Address

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

303 N. 12th Avenue Pocatello, ID 83201

6. Future effective date of filing (optional): _____

7. 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

Signature of a manager, member or authorized person.

Signature

Angie Beck

Secretary of State use only

Typed Name:

Angie Beck

Signature

Typed Name:

IDAHO SECRETARY OF STATE
01/19/2012 05:00
CK: 1639 CT: 266079 BH: 1396748
1 @ 100.00 = 100.00 PROF LLC # 2