







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 #: 0006154321

Date Filed: 3/10/2025 10:52:41 AM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Da descriptions below)	y Service (see Expedited (+\$40; filing fee \$140)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Care Essentials, LLC
2. The complete street address of the principal office is:	
Principal Office Address	1697 W. NESQUALLY AVE. POST FALLS, ID 83854
3. The mailing address of the principal office is:	
Mailing Address	1697 W NESQUALLY AVE POST FALLS, ID 83854-7360
4. Registered Agent Name and Address	
Registered Agent I affirm that the registered agent appointe	Registered Agent Michelle R Astle Physical Address: 1697 W NESQUALLY AVE POST FALLS, ID 83854-7360 Mailing Address: 1697 W NESQUALLY AVE POST FALLS, ID 83854-7360 d has consented to serve as registered agent for this entity.
5. Governors	
Name	Address
M.R. Essentials, LLC	1697 W. NESQUALLY AVE. POST FALLS, ID 83854
Signature of Organizer:	
Michelle Astle	03/10/2025
Sign Here	Date