



CERTIFICATE OF ORGANIZATION 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

2016 MAY 23 PM 2:25

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

AHC of Paradise Valley, LLC

(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:

215 N. Whitley Drive, Suite 3, Fruitland, ID 83619

(Street Address)

(Mailing Address, if different)

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

Cindy M Stice

215 N. Whitley Drive, Suite 3, Fruitland, ID 83619

(Name)

(Address cannot be a post office box or postal mail box)

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

Advanced Health Care Corporation 215 N. Whitley Drive, Suite 3, Fruitland, ID 83619

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

215 N. Whitley Drive, Suite 3, Fruitland, ID 83619

(Address)

Signature of organizer(s)

Signature: David W Nattress

Printed Name: David W Nattress

Signature: _____

Printed Name: _____

Secretary of State use only

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05/23/2016 05:00

CK:12648 CT:225537 BH:1529853

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