







## STATE OF IDAHO

## Office of the secretary of state, Lawerence Denney 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 #: 0004389303

Date Filed: 8/20/2021 9:14:13 AM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same descriptions below)	Day Service (see	Same Day Service (+\$100; filing fee \$200)	
1. Limited Liability Company Name			
Type of Limited Liability Company		Limited Liability Company	
Entity name		CARE Institute LLC	
2. The complete street address of the principal office is:			
Principal Office Address		2850 SUMMIT DR POCATELLO, ID 83201	
3. The mailing address of the principal office is:			
Mailing Address		2850 SUMMIT DR POCATELLO, ID 83201-8004	
4. Registered Agent Name and Address			
Registered Agent		Registered Agent	
		DANIEL PACKARD Physical Address:	
		1000 RIVERWALK DRIVE	
		STE 100	
		IDAHO FALLS, ID 83402	
		Mailing Address:	
		1000 RIVERWALK DR	
		STE 100 IDAHO FALLS, ID 83402-3304	
✓ I affirm that the registered agent appoint	nted has consented t	o serve as registered agent for this entity.	
Name		Address	
FAHIM RAHIM		2850 SUMMIT DR POCATELLO, ID 83201	
Signature of Organizer:	1		
FAHIM RAHIM		08/20/2021	
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