



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2013 MAR 19 PM 3:57

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

RehabAuthority Yellowstone **LLC**

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

495 Yellowstone Ave, Ste A, Pocatello, ID 83201

(Street Address)

1560 S Carol St, Meridian, ID 83646-1839

(Mailing Address, if different than street address)

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

Kevin Hulsey

(Name)

1560 S Carol St, Meridian, ID 83646-1839

(Street Address)

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

**Name**

**Address**

Kevin Hulsey

1560 S Carol St, Meridian, ID 83646-1839

Galen Danielson

1560 S Carol St, Meridian, ID 83646-1839

Corey Rasmussen

495 Yellowstone Ave, Ste A, Pocatello, ID 83201

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

1560 S Carol St, Meridian, ID 83646-1839

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: Galen Danielson

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
03/20/2013 05:00  
CK: 15353 CT: 253358 BH: 1365400  
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