





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 #: 0004780947

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Ser descriptions below)	rvice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Journey Healthcare, LLC
2. The complete street address of the principal office is:	
Principal Office Address	5235 N TOSCANA AVE MERIDIAN, ID 83646-3509
3. The mailing address of the principal office is:	
Mailing Address	5235 N TOSCANA AVE MERIDIAN, ID 83646-3509
4. Registered Agent Name and Address	
Registered Agent	Registered Agent
	Alexandria W Mwanga Physical Address:
	5235 N. TOSCANA AVENUE
	MERIDIAN, ID 83646
	Mailing Address:
	5235 N TOSCANA AVE MERIDIAN, ID 83646-3509
I affirm that the registered agent appointed has 5. Governors	s consented to serve as registered agent for this entity.
Name	Address
Alexandria W Mwanga	5235 N. TOSCANA AVENUE MERIDIAN, ID 83646
Signature of Organizer:	
Alexandria Mwanga	06/10/2022
Sign Here	Date