







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-

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Sedescriptions below)	ervice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	J BELLE NURSING LLC
The complete street address of the principal office is: Principal Office Address	29241 PEARL RD PARMA, ID 83660
3. The mailing address of the principal office is:	
Mailing Address	29241 PEARL RD PARMA, ID 83660-6335
Registered Agent Name and Address	
Registered Agent I affirm that the registered agent appointed ha	Registered Agent JODI EDDY Physical Address: 29241 PEARL RD PARMA, ID 83660 Mailing Address: 29241 PEARL RD PARMA, ID 83660-6335 as consented to serve as registered agent for this entity.
5. Governors	
Name	Address
JODI EDDY	29241 PEARL RD PARMA, ID 83660
Signature of Organizer:	
	10/25/2021
JODI EDDY	10/25/2021