0006174636

STATE OF IDAHO

Office of the secretary of state, Phil McGrane

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 #: 0006174636

Date Filed: 3/26/2025 3:20:26 PM

Certificate of Organization Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see descriptions below)	Expedited (+$40; filing fee $140)

1. Limited Liability Company Name

Type of Limited Liability Company	Limited Liability Company
Entity name	Mobile Wound Healing USA LLC

2. The complete street address of the principal office is:

Principal Office Address	784 S. CLEARWATER LOOP STE R POST FALLS, ID 83854

3. The mailing address of the principal office is:

Mailing Address	784 S CLEARWATER LOOP STE R POST FALLS, ID 83854-9599

4. Registered Agent Name and Address

Registered Agent	REGISTERED AGENTS INC Commercial Registered Agent Physical Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854 Mailing Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854

☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

5. Governors

Name	Address
Leif Andersen	784 S. CLEARWATER LOOP STE R POST FALLS, ID 83854
Amanda Witthauer	784 S. CLEARWATER LOOP STE R POST FALLS, ID 83854

Signature of Organizer:

Robin Jones — Sign Here

03/26/2025 — Date

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