Signature; \_

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## CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>. FILED EFFECTIVE

2017 MAY -9 PM 2: 57

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the professional limited liability company is:  RN Coverage, PLLC	
2.	The complete etreet and mailing addresses of the principal office is: 83 S. Skye Drive, Nampa, Idaho, 83651  (Street Address)	
	(Malling Address, if different)	
3.	Name and street address of registered agent in Idaho:	
	United States Corporation Agents, Inc. 800 W. Main St., Ste. 1460, Boise, ID 83702	
	(Name) (Address)	
۸.	The name and address of at least one governor of the limited itability company:	
	Sophia Bautista 83 S. Skye Drive, Nampa, Idaho, 83651	
	(Address)	
	(Nane)	
	(Addross)	
	(Name) (Address)	
5,	Mailing address for future correspondence (annual report notices):	
	<u>c/o 83 S. Skye Drive, Nampa, Idaho, 83651</u>	
	(Aodress)	
6.	The limited liability company is a professional company and the pri	nate al sustant
	he limited liability company is a professional company, and the principal profession or professions for which members are Ify licensed or otherwise legally authorized to render professional services is:	
-	nursing	
7.	Signature of a manager, member, or an organizer.	Secretary of State use only
Print	Cheyenne Moseley, Legalzoom.com, Inc.	
	ature:	
•		IDAHO SECRETARY OF STATE
Printe	ed Name:	05/09/2017 05:00
		CK:13370802 CT:172099 BH:158326

Rev. 06/2015

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