



0004966982



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-

File #: 0004966982

Date Filed: 11/1/2022 4:20:42 PM

Certificate of Organization Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see descriptions below) Standard (filing fee \$100)

1. Limited Liability Company Name
 Type of Limited Liability Company Limited Liability Company
 Entity name Northwest Rural Health Clinic LLC

2. The complete street address of the principal office is:
 Principal Office Address 7173 E SUPER ONE LOOP
 ATHOL, ID 83801

3. The mailing address of the principal office is:
 Mailing Address AMY REYNOLDS
 1593 E POLSTON AVE
 POST FALLS, ID 83854-5326

4. Registered Agent Name and Address
 Registered Agent Registered Agent
 NORTH IDAHO DAY SURGERY, LLC
 Physical Address:
 1593 E POLSTON AVE
 POST FALLS, ID 83854
 Mailing Address:
 1593 E POLSTON AVE
 POST FALLS, ID 83854-5326

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

5. Governors

Name	Address
NSH North Idaho, Inc	1593 E POLSTON AVE POST FALLS, ID 83854

Signature of Organizer:

Amy Griffitts Reynolds

Sign Here

11/01/2022

Date