



0004966982

**STATE OF IDAHO**

Office of the secretary of state, Lawrence 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				
<input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.					
5. Governors					
<table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>NSH North Idaho, Inc</td><td>1593 E POLSTON AVE POST FALLS, ID 83854</td></tr></tbody></table>		Name	Address	NSH North Idaho, Inc	1593 E POLSTON AVE POST FALLS, ID 83854
Name	Address				
NSH North Idaho, Inc	1593 E POLSTON AVE POST FALLS, ID 83854				
Signature of Organizer:					
<i>Amy Griffiths Reynolds</i>	11/01/2022				
Sign Here	Date				

B0751-4851 11/01/2022 4:27 PM Received by Office of the Idaho Secretary of State