



# CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

**-FILED-**

File #: 0005128478

Date Filed: 2/21/2023 2:29:00 PM

1. The name of the professional limited liability company is:

**Carolyn Block Physical Therapy, PLLC**

2. The complete street and mailing addresses of the principal office is:

**372 South Eagle Road, Suite 288, Eagle, ID 83616**

(Street Address)

(Mailing Address, if different)

3. Name and street address of registered agent in Idaho:

**Carolyn W Block**

**1700 E. Highgate Ct., Eagle, ID 83616**

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

**Carolyn W Block**

**372 South Eagle Road, Suite 288, Eagle, ID 83616**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

**372 South Eagle Road, Suite 288, Eagle, ID 83616**

(Mailing Address)

6. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is:

**Physical Therapy**

7. Signature of a manager, member, or an organizer.

Printed Name: **Carolyn W Block**

Signature: Carolyn W Block

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only