

**FILED EFFECTIVE**

# AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 JUL -7 PM 3:44

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

IDEAL NURSING SOLUTIONS LLC

2. The name of the limited liability company is amended to read:

3. The date the certificate of organization was originally filed : 9-23-2013

4. The complete street and mailing addresses of the designated principal office is amended to:

5. The mailing address for future correspondence (annual reports) is amended to:

6. The name and address of the managers/members shall be amended as follows:

<u>Name</u>	<u>Address</u>	<u>Add</u>	<u>Delete</u>	<u>Other</u>
DAVE DICKINSON	15702 RIVERSIDE RD CALDWELL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

7. Signature of an authorized person.

*Joe Nourse*  
Signature

JOE NOURSE

Typed Name

Signature

Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE

07/07/2014 05:00

CK:2037566 CT:172099 BH:1432171

1@ 30.00 = 30.00 ORGAN AMEN #2

W129452