







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney ARTICLES OF INCORPORATION (PROFESSIONAL SERVICE CORPORATION)

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 -FILED-

File #: 0004045468

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| Articles of Incorporation (Professional Sen<br>Select one: Standard, Expedited<br>descriptions below) | -           |   | (see Standard (filing fee \$100)  |
|---|-------------|---|---|
| Article 1: Corporation Name Entity name   |             |   | North Star Nursing Services PC  |
| Article 2: Profession  The business is organized to pra   | actice the  | e profession of:                        | Nursing   |
| Article 3: Shares  The number of shares the corporation is authorized to issue:                       |             |   | sue: 1  |
| Article 4: Effective Date The corporation shall be effective  |             |   | when filed with the Secretary of State.   |
| Article 5: The mailing address of the corporation shall be: Mailing Address:                          |             |   | PO BOX 35<br>ATHOL, ID 83801-0035   |
| Article 6: Registered Agent Name and Add Registered Agent  I affirm that the registered a             |             | pointed has cons                        | Registered Agent Brian Nassar Physical Address: 663 BERRY PATCH LOOP ROAD ATHOL, ID 83801 Mailing Address: 663 BERRY PATCH LOOP ATHOL, ID 83801-8987 sented to serve as registered agent for this entity. |
| Article 7: Incorporator Name(s) and Addre   | ss(es)      |   |   |
| Name  |             | Incorporator Address                    |   |
|   |             | 663 BERRY PATCH LOOP<br>ATHOL, ID 83801 |   |
| Article 8: Director Names and Addresses   |             |   |   |
| Name  | Title       |   | Director Address  |
| Dani'L Jolly  | Director    |   | 663 BERRY PATCH LOOP<br>ATHOL, ID 83801   |
| The Articles of Incorporation must be signed  | ed by at le | ast one Incorporator                    | ·   |
| Dani'L Jolly  |             |   | 10/30/2020  |
| Dani'L Jolly  |             |   | Date  |