



CERTIFICATE OF ORGANIZATION 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

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1. The name of the limited liability company is:

Novitas Transitions, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

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

2625 Plaza Road, Emmett, Idaho 83617

(Street Address)

PO Box 580, Emmett, Idaho 83617

(Mailing Address, if different)

3. The name and complete street address of the registered agent:

Dr. Andrew Sapp

(Name)

2625 Plaza Road, Emmett, Idaho 83617

(Address)

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

Dr. Andrew Sapp

(Name)

2625 Plaza Road, Emmett, Idaho 83617

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

PO Box 580, Emmett, Idaho 83617

(Mailing Address)

Signature of organizer(s).

Printed Name: **Dr. Andrew Sapp**

Signature: 

Printed Name: _____

Signature: _____

Secretary of State use only