





STATE OF IDAHO Office of the secretary of state, Phil McGrane 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 #: 0005446367

Date

Date Filed: 10/27/2023 12:43:25 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service descriptions below)	(see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	A Magic Valley Caregiving LLC
2. The complete street address of the principal office is:	
Principal Office Address	TAYLOR REES
	350 FOURTH AVE W TWIN FALLS, ID 83301
3. The mailing address of the principal office is:	070 0/0// INE DD
Mailing Address	372 SKYLINE DR POCATELLO, ID 83204-4806
(B) (1) (A) (B) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	
4. Registered Agent Name and Address	Pagistared Agent
Registered Agent	Registered Agent Taylor T Powell-rees
	Physical Address:
	372 SKYLINE DR
	POCATELLO, ID 83204 Mailing Address:
	372 SKYLINE DR
	POCATELLO, ID 83204-4806
☑ I affirm that the registered agent appointed has con	sented to serve as registered agent for this entity.
5. Governors	
Name	Address
Taylor T Powell-Rees	372 SKYLINE DR
	POCATELLO, ID 83204
Signature of Organizer:	
taylor powell-rees	10/27/2023

Sign Here