

## CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2017 MAY 16 AM 8: 49

SECRETARY OF STATE STATE OF IDAHO

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>.

The name of the professional limited liability company is:  One Healing Touch PLLC			
2.	The complete street and mailing addresses of the principal office is: 664 E 200 S, Jerome, Idaho, 83338		
	(Street Address)		
	(Mailing Address, if different)	<u></u>	
3.	Name and street address of registered agent <u>in Idaho</u> :		
	Laurie A. Edwards	664 E 200 S, Jerome, Idaho, 83338	
	(Name)	(Address)	
4.	The name and address of at least one governor of the limited liability company:		
	Laurie A. Edwards	664 E 200 S, Jerome, Idaho, 83338	
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	664 E 200 S, Jerome, Idaho, 83338		
	(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:		
	N	ursing	
			Secretary of State use only
7.	Signature of a manager, mem	ber, or an organizer.	}
D.,	inted Name: Laurie A. Edwards		1DAHO SECRETARY OF STATE 05/16/2017 05:00
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Si	gnature Juliu A. El	Wards)	10 100.00 = 100.00 PROF LLC #2
Pr	inted Name:		
			W18342D
Sic	gnature:		- \ -

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