







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 #: 0005871744

08/27/2024

Date

Date Filed: 8/27/2024 12:55:12 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Da descriptions below)	y Service (see Expedited (+\$40; filing fee \$140)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Poppy Clinic LLC
2. The complete street address of the principal office is:	
Principal Office Address	110 W. 31 STREET BOISE, ID 83714
3. The mailing address of the principal office is:	
Mailing Address	110 W 31ST ST BOISE, ID 83714-6605
4. Registered Agent Name and Address	
Registered Agent	Registered Agent Miah Mollay Physical Address:
	110 W 31ST ST BOISE, ID 83714-6605
	Mailing Address: 110 W 31ST ST BOISE, ID 83714-6605
☑ I affirm that the registered agent appointe	ed has consented to serve as registered agent for this entity.
5. Governors	
Name	Address
1	5784 W OHARA COURT BOISE, ID 83703

Signature of Organizer:

Miah Mollay

Sign Here