







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney 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 #: 0003974560

Date Filed: 8/18/2020 10:57:24 AM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)		Expedited (+\$40; filing fee \$140)	
1. Limited Liability Company Name			
Type of Limited Liability Company		Limited Liability Company	
Entity name		Walker Health NP, LLC	
The complete street address of the principal office is: Principal Office Address		CRAIG WALKER 505 LOGAN STREET BOISE, ID 83712	
3. The mailing address of the principal office is:			
Mailing Address		CRAIG WALKER 505 E LOGAN ST BOISE, ID 83712-6344	
4. Registered Agent Name and Address			
Registered Agent		Registered Agent Craig Walker Physical Address: 505 LOGAN STREET BOISE, ID 83712 Mailing Address: 505 E LOGAN ST BOISE, ID 83712+6344	
I affirm that the registered agent appointed	d has consented t	o serve as registered agent for this entity.	
5. Governors			
Name	Address		
Craig Walker	505 LOGAN STREET BOISE, ID 83712		
Signature of Organizer:			
Craig Walker		08/18/2020	
Sign Here		Date	