



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 AUG 26 AM 8:40

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Serenity Care Homes LLC

2. The complete street and mailing addresses of the initial designated office:

11496 Lake Lowell Ave

(Street Address)

Nampa, Idaho 83686

(Mailing Address, if different than street address)

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

Kellie M Reid RN

(Name)

11496 Lake Lowell Ave, Nampa, Idaho 83686

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Tyler Waggoner

177<sup>58</sup> Mesa Springs Road, Nampa, Idaho 83687

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

11496 Lake Lowell Ave, Nampa, Idaho 83686

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature *Kellie M Reid*

Typed Name: Kellie M Reid

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/26/2014 05:00

CK:1030 CT:300474 BH:1438816

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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