



ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2006 JUN -5 AM 9:18

SECRETARY OF STATE
STATE OF IDAHO

- The name of the professional limited liability company is:
Michelle C Christensen Physical Therapy, PLLC
- The professional LLC is organized for the practice in the profession of: Physical Therapy
- The address of the initial registered office is: 225 North 7th Street, Teton, ID, 83452
and the name of the initial registered agent is: Michelle C Christensen
- Management of the professional limited liability company will be vested in:
☒ Manager(s) ☐ Member(s)
- If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.

Name	Address
Michelle C Christensen	

- Signature(s) of at least one person responsible for forming the limited liability company:

Signature Michelle C Christensen
Typed Name Michelle C Christensen
Capacity Manager

Signature _____
Typed Name _____
Capacity _____

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Revised 08/2002
Web Form

IDAHO SECRETARY OF STATE
06/05/2006 05:00
CK: 881 CT: 200996 BH: 958134
1 @ 100.00 = 100.00 PROF LLC # 2

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