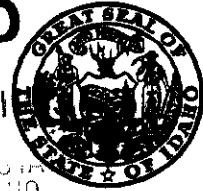


ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application) 99 DEC -6 AM 11



1. The name of the limited liability company is: Teton Physical Therapy West Side LLC
2. The address of the initial registered office is: 2037 E 17th St. Idaho Falls ID 83404
(not a PO Box)
- and the name of the initial registered agent at that address is: Russell Griffeth

Signature of registered agent: *Russell Griffeth*

3. The latest date certain on which the limited liability company will dissolve: 12/31/2035
4. Is management of the limited liability company vested in a manager or managers?
☒ Yes ☐ No (check appropriate box)
5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

Name:

Address:

Teton Physical Therapy, Inc.

2037 E 17th St., Idaho Falls, ID 83404

6. Signature of at least one person listed in #5 above:

Russell Griffeth - President

IDAHO SECRETARY OF STATE

Secretary of State use only

12/06/1999 09:00
CK: 1158 CT: 123736 BH: 271273

1 @ 100.00 = 100.00 ORGAN LLC # 2

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