

ARTICLES OF ORGANIZATIONED/EFFECTIVE PROFESSIONAL LIMITED LIABILITY COMPANYON 26 AM 9: 48

W 12305

(Instructions on back of application) TARY OF STATE The name of the professional limited liability company is:

STATE OF IDAHO

EAGLE ORTHOPEDIA SPORTS PHYSICAL THERAPY, P.L.L.C. 2. The professional limited liability company is organized for the practice of the profession(s) of: providing physical therapy services 3. The address of the initial registered office is 9 W. Rendezvous, Driggs, ID 83422 (not a PO Box) _ , and the name of the initial registered agent at that address is Michael Bleffert Signature of registered agent: Michael Buller Is management of the limited liability company vested in a manager or managers? ☐ Yes ™ No (check appropriate box) If management is vested in one or more manager(s), list the name(s) and address(es) of at 5. least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one member. Name: Address: Michael Bleffert 9 W. Rendezvous, Driggs, ID 83422 Christi Bleffert 9 W. Rendezvous, Driggs, ID 83422 6. Signature(s) of at least one person listed in #6 5 IDAMO SECRETARY OF STAT Secretary of State use only 06/26/2000 09:00 CK: 13461 CT: 2552 BH: 329051 1 & 100.00 = 100.00 PROF LLC # 2