







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

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Sedescriptions below)	rvice (see Expedited (+\$40; filing fee \$140)
Limited Liability Company Name Type of Limited Liability Company	Professional Limited Liability Company
Entity name	Modern Anesthesia Care, PLLC
Profession The business is organized to practice the profession	on of: Medicine
• • • • • • • • • • • • • • • • • • • •	on or.
The complete street address of the principal office is: Principal Office Address	1017 COBBLE CREEK RD TWIN FALLS, ID 83301
3. The mailing address of the principal office is:	
Mailing Address	1017 COBBLE CREEK RD TWIN FALLS, ID 83301-8527
4. Registered Agent Name and Address	
Registered Agent	Registered Agent Jason Daniel Rojas Physical Address: 1017 COBBLE CREEK RD TWIN FALLS, ID 83301 Mailing Address: 1017 COBBLE CREEK RD TWIN FALLS, ID 83301-8527
I affirm that the registered agent appointed has	s consented to serve as registered agent for this entity.
5. Governors	
Name	Address
Jason Daniel Rojas	1017 COBBLE CREEK RD TWIN FALLS, ID 83301
Signature of Organizer:	
Dean J. Parker	09/09/2022
Sign Here	Date