

Signature: _

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2017 JUL 17 AM 9: 40

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate.

The name of the professional limite	ed liability company is:
Silver Lake Surgical Solution	s, PLLC.
The complete street and mailing ac 8261 N. Summerfield Loop,	•
(Street Address)	
(Mailing Address if different)	
Name and street address of registe	ered agent <u>in Idaho</u> :
Richard Richardson	8261 N. Summerfield Loop, Hayden, ID 83835
(Name)	(Address)
The name and address of at least	one governor of the limited liability company:
Richard Richardson	8261 N. Summerfield Loop, Hayden, ID 83835
(Name)	(Address)
(Name)	(Address)
(Name)	(Address)
Mailing address for future correspondent	ondence (annual report notices):
8261 N. Summerfield Loop, H	Hayden, ID 83835
(Address)	
duly licensed or otherwise legally a	rofessional company, and the principal profession or professions for which members a authorized to render professional services is: ursing
	uranig
	Secretary of State use only
Signature of a manager, members Richard Richardsor	Thill decomment on anoma
naturé:	CK:770 CT:342704 BH:1593835 16 100.00 = 100.00 PROF LLC #
nted Name:	W186288

Rev. 08/2015