Printed Name: ___ Mark S Williams, DO

Printed Name: _

Signature: -

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>. 2016 MAR -4 AM 8: 29
SECRETARY OF STATE

		"- OF IDAHO"-
The name of the professional limite	d liability company is:	
Sports Medicine and Specialty	y Services PLLC	
The complete street and mailing ad-	dresses of the principal office is:	
4020 Saint James Loop, Nan	npa, Idaho, 83687	
(Street Address)		
(Mailing Address, if different)		
Name and street address of registe	red agent <u>in Idaho</u> :	
Mark S. Williams, DO	4020 Saint James Loop, Nampa, Idaho, 83687	
(Name)	(Address)	
The name and address of at least of	one governor of the limited liabili	ty company:
Mark S. Williams, DO	4020 Saint James Loop, Nampa, Idaho, 83687	
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
Mailing address for future correspor	ndence (annual report notices):	
4020 Saint James Loop, Nam		
(Address)		
The limited liability company is a produly licensed or otherwise legally at		ncipal profession or professions for which members are services is:
Me	edicine	
		Secretary of State use only
Signature of a manager, member	er or an ornanizer	TOTAL REFERENCY OF SMIME

Rev. 08/2015

1DAHO SECRETARY OF STATE 03/04/2016 05:00

CK:1251 CT:321275 BH:1516817 18 100.00 = 100.00 PROF LLC #2

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