

FILED EFFECTIVE



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 APR -2 AM 8:10
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Best Choice Health Insurance LLC

2. The street address of the initial registered office is:

2184 W Valli Hi Rd Eagle, Id 83616

and the name of the initial registered agent at the above address is:

Juli Van Wyk

3. The mailing address for future correspondence is:

P O Box 864 Eagle, ID 83616

4. The limited liability company will be:

Manager-managed ☐ or Member-managed ☒ (please check the appropriate box)

5. If manager-managed, list the name(s) and address(es) of at least one initial manager.
If member-managed, list the name(s) and address(es) of at least one initial member.

Name

Address

Juli Van Wyk

2184 W Valli Hi Rd Eagle, ID 83616

Rebecca Muguira

1145 Echohawk Way Eagle, ID 83616

6. Signature of at least one person responsible for forming the limited liability company:

Signature: Juli Van Wyk

Typed Name: Juli Van Wyk

Capacity: member

Signature: Rebecca Muguira

Typed Name: Rebecca Muguira

Capacity: member

Secretary of State use only

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Revised 05/2007

IDAHO SECRETARY OF STATE
04/02/2008 05:00
CK: 6523 CT: 165288 BH: 1107896
1 @ 100.00 = 100.00 ORGAN LLC # 2

Web Form

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