



**CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

11 SEP - 1 PM 12:28

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

MedMarketer, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

900 E. Columbary Court, Eagle, ID 83616

(Street Address)

PO Box 2678, Eagle, ID 83616

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Tim Reid

450 E. Beacon Light Rd, Eagle, ID 83616

(Name)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Philip J. Gorman

900 E. Columbary Court, Eagle, ID 83616

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5. Mailing address for future correspondence (annual report notices):

PO Box 2678, Eagle, ID 83616

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature



Typed Name: PHILIP GORMAN

Secretary of State use only

Signature

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Typed Name: \_\_\_\_\_

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