

**FILED EFFECTIVE**

**ARTICLES OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

To the Secretary of State of Idaho FEB 20 2 07 PM '01  
Corporations Division  
700 West Jefferson, Room 203  
P. O. Box 83720, Boise, Idaho, 83720-0080

1. The name of the limited liability company is: **MEDICAL DATA MANAGEMENT SERVICES, LLC**

2. The address of the initial registered office is: **16845 OASIS, CALDWELL, ID, 83605**

The name of the initial registered agent at that address is: **GERRE McCLINTICK**

Signature of registered agent: *Gerre H. McClintick*

3. Is management of the limited liability company vested in a manager or managers?

YES **X** NO     

4. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

NAME:

ADDRESS:

**Gerre McClintick**

**16845 Oasis, Caldwell, ID, 83605**

**Larry Reinhart**

**P.O. Box 50540, Idaho Falls, ID, 83402**

5. Signature of at least one person listed in #4 above:

*Gerre H. McClintick*  
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Secretary of State use only

**IDAHO SECRETARY OF STATE**

**02/21/2001 09:00**  
CK: 2603 CT: 142522 BH: 300302

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