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**CERTIFICATE OF ORGANIZATION  
PROFESSIONAL  
LIMITED LIABILITY COMPANY****FILED EFFECTIVE**

2017 APR -5 AM 10:26

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.

1. The name of the professional limited liability company is:

**KENNETH C RYAN MD PLLC**

2. The complete street and mailing addresses of the principal office is:

**631 S 7TH AVE POCATELLO, ID 83201**

(Street Address)

**1942 N MAIN ST NORTH LOGAN, UT 84341**

(Mailing Address, if different)

3. Name and street address of registered agent in Idaho:

**TRAVIS M KUNZ CPA**

(Name)

**19 S STATE ST PRESTON, ID 83263**

(Address)

4. The name and address of at least one governor of the limited liability company:

**KENNETH C RYAN**

(Name)

**631 S 7TH AVE POCATELLO, ID 83201**

(Address)

(Name)

(Address)

(Name)

(Address)

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

**1942 N MAIN ST NORTH LOGAN, UT 84341**

(Address)

6. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is:

**Medicine**



7. Signature of a manager, member, or an organizer.

**KENNETH C RYAN**

Printed Name: \_\_\_\_\_

Signature: 

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDaho SECRETARY OF STATE  
04/05/2017 05:00  
CK:13152658 CT:172099 BH:1577373  
1@ 100.00 = 100.00 PROF LLC #2  
1@ 20.00 = 20.00 EXPEDITE C #3

