252



ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

700 SEP -8 PM 4: 00

(Instructions on back of application)

	(mes desire on strong or apprior	301.7	C C IDA ID
1.	The name of the professional limited liability co Gooding Family Ph	mpany is: ysicians, PLLC	
2.	The professional LLC is organized for the practice in the profession of: Medicine		
3.	The address of the initial registered office is:134 West 4th Avenue, Gooding, ID 83330		Gooding, ID 83330
	and the name of the initial registered agent is: _	Reid W. L	-ofgran
4.	Management of the professional limited liability company will be vested in:		
	☑ Manager(s) ☐ Memb	per(s)	
5.	5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.		
	Name	Address	
	Reid W. Lofgran	134 West 4th Avenue, Go	poding, ID 83330
6. 5	gnature(s) of at least one person responsible for forming the limited liability company:		
S	Signature Kip W. Lafa		
Ţ	yped Name Reid W. Lofgran	c p66	
С	apacity Manager	d used	
s	ignature	of organization_pric_p66	
Ţ	yped Name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IDAHO SECRETARY OF STATE 09/08/2003 05:00
C	apacity	1	642506568PAW CT: 172899 BH: 706 @ 100.60 = 100.00 PROF LLC # 6 @ 20.60 = 20.60 EXPEDITE C #
		- G HOULDIN	E CO.00 → CO.00 EAPENTIE C#

W 25850