

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 MAY 11 PM 2:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Survival Medical, LLC

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

237 N. 2nd E., Ste. 102, Rexburg, ID 83440

(Street Address)

(Mailing Address, if different than street address)

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

Jonathan Glenn Roberts

(Name)

1357 S. 4000 W., Rexburg, ID 83440

(Street Address)

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

NameAddress

Jonathan Glenn Roberts

1357 S. 4000 W., Rexburg, ID 83440

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

237 N. 2nd E., Ste. 102, Rexburg, ID 83440

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Jonathan Glenn Roberts

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/11/2015 05:00

OK: PREPAID CT: 84469 BH: 1475012

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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