



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)

FILED EFFECTIVE

1. The name of the limited liability company is:

MEDPARTNERS, LLC

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

500 S. 11th Avenue, Ste 303, Pocatello, Idaho 83201

(Street Address)

(Mailing Address, if different than street address)

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

Richard Maynard, DO

(Name)

500 S. 11th Avenue, Ste 303, Pocatello, ID 83201

(Street Address)

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

Name

Address

Richard Maynard

500 S. 11th Avenue, Ste 303, Pocatello, ID 83201

Mark Mansfield

500 S. 11th Avenue, Ste 303, Pocatello, ID 83201

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

500 S. 11th, Ste 303, Pocatello, Idaho 83201

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

X Signature

Typed Name: Richard Maynard

X Signature

Typed Name: Mark Mansfield

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
08/17/2009 05:00
CK: 16265 CT: 138416 BH: 1183106
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