## FILED EFFECTIVE



## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANYEP - 1 AM 8: 50

(Instructions on back of application) SECRETARY SERVICE ARE STATE OF IDAHO

		STATE OF IDAHO
1.	The name of the limited liability comp	pany is:
	Palmeadow Professional Suites LL	C
2.	The street address of the initial regist	ered office is:
	9601 W. State Street Suite 203, Bo	nise, ID 83714
	and the name of the initial registered Jean Cariaga	agent at the above address is:
3.	The mailing address for future corresponded with the Street Suite 203, Bo	
4.	Management of the limited liability company will be vested in:	
	Manager(s) or Member(s)	(please check the appropriate box)
5.	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.	
	Name	Address
	Jean Cariaga	9601 W. State St. Suite 203. Boise 1D 83714
	Jean Cariaga	9601 W. State St. Suite 203, Boise, ID 83714
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	Jean Cariaga	9601 W. State St. Suite 203, Boise, ID 83714
6.	Signature of at least one person resp	onsible for forming the limited liability company:
	Signature of at least one person responding and all and	onsible for forming the limited liability company:
	Signature of at least one person responding and surger	onsible for forming the limited liability company:
	Signature of at least one person responding and all and	onsible for forming the limited liability company:
	Signature of at least one person responding to the second	onsible for forming the limited liability company:
	Signature of at least one person responding and surger	onsible for forming the limited liability company:  Secretary of State use only  IDAHO SECRETARY OF STATE  99/01/2004 05:00  CK: 4195 CT: 161299 BH: 763889