



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 JUL 20 AM 8:52

SECRETARY OF STATE
STATE OF IDAHO

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

Jonathan King, DO PLLC

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

775 Pole Line Road West, Suite 312, Twin Falls, ID 83301

(Street Address)

PO Box 1293, Twin Falls, ID 83303

(Mailing Address, if different)

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

John A. Coleman

401 Gooding Street North, Suite 201, Twin Falls, ID 83301

(Name)

(Address)

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

Jonathan King

775 Pole Line Road West, Suite 312, Twin Falls, ID 83301

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

PO Box 1293, Twin Falls, ID 83303

(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.

Printed Name: John A. Coleman

Signature: John A. Coleman

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

07/20/2017 05:00

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