



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2014 FEB -6 PM 4: 29

SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)

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

Retina Specialists of Idaho Partners, PLLC

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

13923 W. Wainwright Dr. Suite 301 Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Denton Roberts, MD

(Name)

13923 W. Wainwright Dr. Suite 301, Boise, ID 83713

(Street Address)

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

Denton Roberts, MD

Name

13923 W Wainwright Dr Ste 301 Boise ID

Address

83713

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

Same as above

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

7. 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

Signature of a manager, member or authorized person.

Signature

Mark Paskett

Typed Name:

Mark Paskett

Signature

Typed Name:

Secretary of State use only

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