



**ARTICLES OF ORGANIZATION** **FILED/EFFECTIVE**  
**PROFESSIONAL LIMITED**  
**LIABILITY COMPANY** **NOV 16 PM 4:42**

(Instructions on back of application) **SECRETARY OF STATE**  
**STATE OF IDAHO**

1. The name of the professional limited liability company is: Red Flag Medical Clinic  
P.L.L.C.
2. The professional limited liability company is organized for the practice of the profession(s) of: Medicine
3. The address of the initial registered office is 4105 W State Street, Boise, Idaho  
83703 (not a PO Box), and the name of the initial registered agent at that address is Christine J. Gilmore

Signature of registered agent: \_\_\_\_\_

The mailing address is: 915 O'Farrell St., Boise, Idaho 83702

4. Is management of the limited liability company vested in a manager or managers?  Yes  No (check appropriate box)
5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one member.

Name:

Address:

Christine J. Gilmore

915 O'Farrell St., Boise, Id. 83702

6. Signature(s) of at least one person listed in #5 above:

Christine J. Gilmore

IDAHO SECRETARY OF STATE only

11/16/2000 09:00  
 CK: 6168 CT: 138553 BH: 361085

1 @ 100.00 = 100.00 PROF LLC # 2

W 13455