



# ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**  
02 MAR 22 AM 9:21  
SECRETARY OF STATE  
STATE OF IDAHO

- The name of the professional limited liability company is: Carpal Tunnel Clinic & Physical Therapy Consulting, PLLC
- The professional LLC is organized for the practice in the profession of: physical therapy
- The address of the initial registered office is: 732 Greenwood Dr., Twin Falls, ID  
83301 and the name of the initial registered agent is: David B. Little
- Management of the professional limited liability company will be vested in:  
☐ Manager(s) ☒ Member(s)
- If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.

Name

Address

David B. Little  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

732 Greenwood Dr., Twin Falls, ID  
83301  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Signature(s) of at least one person responsible for forming the limited liability company:

Signature *David B. Little*  
Typed Name David B. Little  
Capacity owner

Signature \_\_\_\_\_  
Typed Name \_\_\_\_\_  
Capacity \_\_\_\_\_

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Revised 01/2001

IDAHO SECRETARY OF STATE  
03/22/2002 05:00  
CK: 4800 CT: 138316 BH: 453899  
1 @ 100.00 = 100.00 PROF LLC # 2

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