







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY **COMPANY**

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0004422802

Date Filed: 9/20/2021 6:15:14 AM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below) | | Standard (filing fee \$100) | |
|--|--------------------------------|---|--|
| Limited Liability Company Name Type of Limited Liability Company | | Professional Limited Liability Company | |
| Entity name | | cook medical, pllc | |
| Profession The business is organized to practice the profession of: | | Medicine | |
| The complete street address of the principal office Principal Office Address | e is: | 3045 WOODRIDGE DR TWIN FALLS, ID 83301 | |
| The mailing address of the principal office is: Mailing Address | | 3045 WOODRIDGE DR TWIN FALLS, ID 83301-8148 | |
| Registered Agent Name and Address Registered Agent | | Registered Agent Scott m cook Physical Address: 3045 WOODRIDGE DR TWIN FALLS, ID 83301 Mailing Address: 3045 WOODRIDGE DR TWIN FALLS, ID 83301-8148 | |
| I affirm that the registered agent ap 5. Governors | ppointed has consented to | o serve as registered agent for this entity. | |
| Name | | Address | |
| Scott m cook | 3045 WOODRIG TWIN FALLS, IE | | |
| Signature of Organizer: | | | |
| Scott Cook | | 09/20/2021 | |
| Sign Here | | Date | |