

ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY



98 MAY 15 AM 9:18 the Secretary of State of Idaho,
P.O. Box 83720, Boise, Idaho 83720-0080
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the professional limited liability company is: SOUTHERN IDAHO
AMBULATORY SURGERY CENTER, 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 589 Shoup Avenue West
Twin Falls, ID 83301 (not a PO Box)

, and the name of the
initial registered agent at that address is Dr. William (Bill) Fitzhugh

Signature of registered agent: _____

4. The latest date certain on which the professional limited liability company will dissolve is:
12/31/2050

5. Is management of the limited liability company vested in a manager or managers?
☐ Yes ☒ No (check appropriate box)

6. 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:

Dr. William (Bill) Fitzhugh

589 Shoup Avenue West

Twin Falls, ID 83301

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

IDAHO SECRETARY OF STATE

05/15/1998 09:00
CX: 16421 CT: 2833 DN: 110936

1 @ 100.00 = 100.00 PROF LLC

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