

FILED EFFECTIVE

252



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2012 FEB 10 PM 1:14

SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)

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

20/20 Family Eyecare PLLC

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

301 S. 4th Ave #C-2 Pocatello, ID 83201

(Street Address)

(Mailing Address, if different than street address)

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

Jacob S. Wessel

(Name)

2635 Channing Way Idaho Falls, ID 83404

(Street Address)

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

Name

Address

Cache M. Crawford

650 Redman St. Chubbuck, ID 83202

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

650 Redman St. Chubbuck, ID 83202

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: Optometry

Signature of a manager, member or authorized person.

Signature

Typed Name: Cache M. Crawford

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/10/2012 05:00
CK: 901437 CT: 172099 BH: 1310100
1 @ 100.00 = 100.00 PROF LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W/10912