

FILED EFFECTIVE

252



# CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2012 JUN 20 PM 2: 56

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

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

M.D. Vanguard PLLC

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

3683 Pearce Idaho Falls, ID 83401

(Street Address)

(Mailing Address, if different than street address)

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

William R. Eder MD

(Name)

377 N 4450 E Rigby, ID 83442

(Street Address)

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

**Name****Address**

Briana Weller BS

3683 Pearce Idaho Falls, ID 83401

Charles Nielson PN

840 S. Tiebreaker Dr. Ammon, ID 83406

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

Charles K Nielson 840 South Tiebreaker Drive Ammon ID 83406

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: Medicine

Signature of a manager, member or authorized person.

Signature

Typed Name: William R. Eder

Signature

Typed Name: Briana H. Weller

Secretary of State use only

IDAHO SECRETARY OF STATE  
06/20/2012 05:00  
CK: 1034672 CT: 172099 BH: 1329149  
1 @ 100.00 = 100.00 PROF LLC # 2

W114977