

FILED EFFECTIVE

2013 MAR 28 AM 9:03

SECRETARY OF STATE
STATE OF IDAHO



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

Foster-Joshi Holdings LLC

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

8836 N Hess Street Suite C Hayden, ID 83835

(Street Address)

(Mailing Address, if different than street address)

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

Dr. Shaun K. Joshi

(Name)

8836 N Hess Street Suite C Hayden, ID 83835

(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Dr. Shaun K. Joshi</u>	<u>8836 N Hess Street Suite C Hayden, ID 83835</u>
<u>Dr. Sherwin S. Foster</u>	<u>3303 E 71st Street Spokane, WA 99223</u>
_____	_____
_____	_____
_____	_____

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

8836 N Hess Street Suite C Hayden, ID 83835

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature [Handwritten Signature]

Typed Name: Dr. Shaun K. Joshi

Signature [Handwritten Signature]

Typed Name: Dr. Shaun K. Joshi

Secretary of State use only

IDAHO SECRETARY OF STATE
03/28/2013 05:00
CK: 4224 CT: 273231 BH: 1366829
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