



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED
EFFECTIVE
2013 MAR 28 AM 9:03
SHERIFF
STATE OF IDAHO

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:

Name

Dr. Shaun K. Joshi

Address

8836 N Hess Street Suite C Hayden, ID 83835

Dr. Sherwin S. Foster

3303 E 71st Street Spokane, WA 99223

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 _____

Secretary of State use only

Typed Name: Dr. Shaun K. Joshi

Signature _____

Typed Name: Dr. Shaun K. Joshi

IDaho SECRETARY OF STATE
03/28/2013 05:00
CK: 4224 CT: 273231 BH: 1366829
1 @ 100.00 = 100.00 ORGAN LLC # 2