



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2017 JUN 27 AM 8:46

SECRETARY OF STATE
STATE OF IDAHO

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

Receptor PLLC

2. The complete street and mailing addresses of the principal office is:

1221 West Hays Street

(Street Address)

Boise, ID 83702

(Mailing Address, if different)

3. Name and street address of registered agent in Idaho:

Jeralyn Jones MD

1221 West Hays St., Boise ID 83702

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Jeralyn Jones MD

1221 West Hays St., Boise ID 83702

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

1221 West Hays St., Boise ID 83702

(Address)

6. 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



7. Signature of a manager, member, or an organizer.

Printed Name: Jeralyn Jones, MD

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/27/2017 05:00

CK:2221 CT:341789 BK:1590879
10 100.00 = 100.00 PROF LLC #2

W185421