



ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

2006 APR -5 AM 9:19
STATE OF IDAHO

- The name of the professional limited liability company is:
Roderick Chiropractic PLLC
- The professional LLC is organized for the practice in the profession of: Chiropractic
- The address of the initial registered office is: 2064 E. 500 N. St. Anthony, ID
83445
and the name of the initial registered agent is: Jeff Roderick
- Management of the professional limited liability company will be vested in:
☐ Manager(s) ☒ Member(s)
- If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.

Name

Address

Jeff Roderick

2064 E. 500 N. St. Anthony, ID
83445

- Signature(s) of at least one person responsible for forming the limited liability company:

Signature [Signature]

Typed Name Jeff Roderick

Capacity Owner - Member

Signature _____

Typed Name _____

Capacity _____

g:\corp\forms\arts of organization_pllc.p65
Revised 09/2002

IDAHO SECRETARY OF STATE
04/05/2004 05:00
CK: 4014 CT: 170120 BH: 737440
1 @ 100.00 = 100.00 PROF LLC # 2

W29730