

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFEGTIVE

(Instructions on back of application)

| مراسق | (Instructions on pack o | , application, | • | SECRETARY OF STATE |
|------------|---|------------------------------|----------------------------------|-----------------------------------|
| | name of the limited liability compedical Consulting of Idaho, LLC | any is: | | STATE OF IDAHO |
| | street address of the initial registe 94 W. Newfield Dr., Eagle, Idaho | | | |
| | the name of the initial registered ul Wielebinski, M.D. | agent at the | above addre | ss is: |
| | The mailing address for future correspondence is: 1194 W. Newfield Dr., Eagle, Idaho 83616 Po Box 2508 | | | |
| 4. The | limited liability company will be: | • | | |
| Mar | nager-managed 🔲 or Member- | -managed | (please ch | eck the appropriate box) |
| 5. If m | anager-managed, list the name(s ember-managed, list the name(s) |) and address and address | s(es) of at lea | ist one initial member. |
| | Name | • | Addr | |
| Pa | aul Wielebinski, M.D. | 1194 W. Ne | wfield Dr., E | agle, Idaho 83616 |
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| | | | | |
| 6. Sig | nature of at least one person resp | consible for fo | orming the lin | nited liability company: |
| Sigr | nature: Jan Tovull | | g S | ecretary of State use only |
| Тур | ed Name: Paul Wielebinski, M.D. Pacity: Member | • | | |
| Сар | acity. | | FG FG | W 69239 |
| Sign | nature | | will.C formeter wheel 69/2007 | IDAHO SECRETARY OF |
| Тур | ed Name: | | Revise Revise | 12/07/2007 CK: 1 CT: 220286 BH |
| Cap | eacity: | | 3 | 1 2 169.82 = 189.89 (|