

# APPLICATION FOR REGISTRATION OF LIMITED LIABILITY PARTNERSHIP J55



To the Secretary of State of Idaho  
PO Box 83720  
Boise, ID 83720-0080

JAN 25 8 36 AM '96

STATE SECRETARY OF IDAHO

The undersigned partnership hereby applies for registration as a Limited Liability Partnership, and submits the following information pursuant to section 53-343A, I.C.

1. The name of the partnership is Sandpoint Pediatrics, L.L.P.
2. It's principal office is located at 420 North Second Ave., Sandpoint, ID 83864
3. It's registered office in Idaho is located at Same as Item 2 above  
\_\_\_\_\_, and the name of the registered agent at that address is Joyce A. Gilbert, M.D.
4. The partnership is organized in the state of Idaho
5. The nature of it's business is practice of medicine
6. The name(s) and address(es) of at least one partner:

| Name                                | Address   |
|-------------------------------------|---|
| <u>Joyce A. Gilbert, M.D., P.A.</u> | <u>420 North Second Ave., Sandpoint, ID 83864</u> |
| <u>George V. DeLand, M.D.</u>       | <u>420 North Second Ave., Sandpoint, ID 83864</u> |
| _____                               | _____   |
| _____                               | _____   |

7. Other matters (optional):  
\_\_\_\_\_  
\_\_\_\_\_

8. Signature(s) of at least one partner listed in item 6.

Joyce A. Gilbert, M.D., P.A.

File in duplicate

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