



# 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.

**FILED EFFECTIVE**

2017 DEC 15 AM 9:13

SECRETARY OF STATE  
STATE OF IDAHO

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

**Treasure Valley Dermatology & Skin Cancer Center PLLC**

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

**12965 W. Paint Dr., Boise, ID 83713**

(Street Address)

(Mailing Address, if different)

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

**Dustin Portela**

**12965 W. Paint Dr., Boise, ID 83713**

(Name)

(Address)

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

**Dustin Portela**

**12965 W. Paint Dr., Boise, ID 83713**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

**12965 W. Paint Dr., Boise, ID 83713**

(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: **Robert Montgomery (Attorney)**

Signature: *R. Montgomery*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

12/15/2017 05:00

CK:15750498 CT:172099 BH:1616527

1@ 100.00 = 100.00 PROF LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

*W/ 929/2*