



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE
2015 MAY 11 PM 3:20

(Instructions on back of application)

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Lyon Medical, LLC

2. The complete street and mailing addresses of the initial designated office:

4932 Mohawk Pl, Pocatello, ID 83204

(Street Address)

PO Box 2900, Boise ID 83701

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Arkoosh Law Offices PLLC

(Name)

802 W. Bannock St., Ste. 900, Boise ID 83702

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Frederick C. Lyon

c/o Arkoosh Law Offices, PO Box 2900, Boise ID 83701

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

PO Box 2900, Boise ID 83701

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Nikeela R. Black

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/11/2015 05:00

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