



**ARTICLES OF ORGANIZATION FILED/EFFECTIVE**  
**PROFESSIONAL LIMITED**  
**LIABILITY COMPANY**  
 APR 26 3 22 PM '01

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(Instructions on back of application)

SECRETARY OF STATE  
STATE DEPARTMENT  
Total Health

1. The name of the professional limited liability company is: Total Health CARE  
Chiropractic, PLLC
2. The professional LLC is organized for the practice in the profession of: Chiropractic
3. The address of the initial registered office is: 403 W. Cherry Lane #102, Meridian  
ID 83642 and the name of the initial registered agent is: Travis Wilson, D.C.
4. Management of the professional limited liability company will be vested in:  

☐ Manager(s)      ☒ Member(s)
5. 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

Travis Wilson, D.C.

403 W. Cherry Lane #102

Meridian, Idaho 83642

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

Signature James H. Hall

Typed Name Travis Wilson, D.C.

Capacity Member

Signature \_\_\_\_\_

Typed Name \_\_\_\_\_

Capacity \_\_\_\_\_

IDAHO SECRETARY OF STATE

04/27/2001 09:00  
CK: 5026 CF: 103638 BH: 393668

1 @ 100.00 = 100.00 PROF LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

Revised 01/2001

W15157