

Typed Name:

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE **PROFESSIONAL**

	LIMITED LIABILITY COMPANY
	(Instructions on back of application) SECRETARY OF STATE STATE OF IDAHO
1. 7	The hane of the professional limited hability company is.
	Kebecca MKirsch D.O. P.L.L.C.
2. 1	The complete street and mailing addresses of the initial designated/principal office:
	(Street Address)
	Pocado 10 To 83201 (Malling Address, if different than street address)
3. 1	The name and complete street address of the registered agent:
*	Robert Kirsch 1321 LAKeview for Poc. ID 83701 (Name) (Street Address)
	The name and address of at least one member or manager of the professional limited ability company:
	Robella Kirsch 1321 LAKEVIOUS POL. 7n 83201
′	Rebecca Kirsch 1321 LAKEVIOW DA POC. 70 83201
5. N	Mailing address for future correspondence (annual report notices):
	1321 Lateriew Dr Pointello, ZD 83701
6. F	-uture effective date of filing (optional):
7. 7	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:
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Sign or is a	ature of an organizer(s). (An organizer is a member, Secretary of State use only acting in behalf of a required, and existing, initial member ♀
or me	nature of an organizer(s). (An organizer is a member, acting in behalf of a required, and existing, initial member embers). Secretary of State use only and existing initial member embers.
	enture Jacob 100.
Тур	ed Name: Rescend M Kirsh D.O. Jab
Sign	ature F IDANO SECRETARY OF STATE

CX; 3186 CT; 247889 BH; 1221523 1 0 198.80 = 160.88 PROF LLC # 2

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