ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2006 SEP 15 AM 9:47

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

   Precision Therapy LLC

2. The street address of the initial registered office is:

   412 Meadowlark Way Twin Falls Idaho, 83301

   and the name of the initial registered agent at the above address is:

   Mark W. Wiseman

3. The mailing address for future correspondence is:

   412 Meadowlark Way Twin Falls Idaho, 83301

4. Management of the limited liability company will be vested in:

   Manager(s) ☐ or Member(s) ☑ (please check the appropriate box)

5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name	Address
Mark W. Wiseman	412 Meadowlark Way Twin Falls Idaho, 83301

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

   Signature: *[signature]*

   Typed Name: Mark W. Wiseman

   Capacity: Owner

   Signature _____

   Typed Name: _____

   Capacity: _____

Secretary of State use only

WS-4425

IDAHO SECRETARY OF STATE
09/15/2006 05:00
CK: 1272 CT: 204474 BH: 975299
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Revised 07/2002

Web Form