



# CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

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For Office Use Only

**-FILED-**

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

**Creswell Foot & Ankle Surgery PLLC**

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

**858 Commerce Dr. Suite 101 Smelterville, ID 83839**

**P.O. Box 483 Smelterville, Idaho 83868**

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

**DaLon Esplin 186 East Judicial Street Blackfoot, Idaho 83201**

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

**Joseph Creswell 2772 Antelope Lane Santa Rosa, CA 95407**

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

**Creswell Foot & Ankle Surgery P.O. Box 483 Smelterville, ID 83858**

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:

**Podiatry**

7. Signature of a manager, member, or an organizer.

Printed Name: **Joseph Creswell**

Signature: 

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

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

Secretary of State use only

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