



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2014 OCT 20 AM 10:19

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

3129 Surgical LLC

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

941 Willow Ln, Pocatello, ID 83201  
(Street Address)

(Mailing Address, if different than street address)

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

Tallen Elquist  
(Name)

941 Willow Ln, Pocatello, ID 83201  
(Street Address)

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

Tallen Elquist  
Name

941 Willow Ln, Pocatello, ID 83201  
Address

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

941 Willow Ln, Pocatello, ID 83201

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: Tallen Elquist

Signature \_\_\_\_\_

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

Secretary of State use only  
IDAHO SECRETARY OF STATE  
10/20/2014 05:00

CK:3696 CT:302308 BH:1445802  
1@ 100.00 = 100.00 ORGAN LLC #2  
1@ 20.00 = 20.00 EXPEDITE C #3

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