

ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

1.	The name of the professional limited liability cor	TO IDALIA	
••	24 HOUR URGEN	•	
2.	The professional LLC is organized for the pract	ice in the profession of: MEDICINE	
3.	The address of the initial registered office is:	329 S WOODRUFF IDAHO FALLS, ID 83401	
	and the name of the initial registered agent is: _	DAVID BOWMAN	
4.	Management of the professional limited liability	company will be vested in:	
	☑ Manager(s) ☐ Member(s)		
5.	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	
	IDAHO URGENT CARE, P.A.	329 S. WOODRUFF	
	***************************************	IDAHO FALLS, IDAHO 83401	
6.	Signature(s) of at least one person responsible for forming the limited liability company:		
	Signature		
	Typed Name DR. DAVID BOWMAN	5947	
	Capacity PRESIDENT, IDAHO URGENT CARE, P.	7. niñ - Ita	
	Cianatura	TO SECRETARY OF STATE Solution 1910 SEC	
	Signature	_ IDANO SECRETARY OF STATE	
	Typed Name Capacity	CK: 1487 CT: 178445 BH: 745977 1 @ 188.89 = 188.89 PROF LLC #	
	- Capacity	Web Form	

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