



# ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED/EFFECTIVE**

01 NOV 13 PM 2:55

STATE OF IDAHO

- The name of the professional limited liability company is: Rexburg Family Care, PLLC
- The professional LLC is organized for the practice in the profession of: Medicine
- The address of the initial registered office is: 70 North Center, Suite 1, Rexburg  
ID 83440 and the name of the initial registered agent is: W. Brad Speakman
- Management of the professional limited liability company will be vested in:  
☐ Manager(s) ☒ Member(s)
- 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

W. Brad Speakman  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

309 South Teton Avenue  
Sugar City, ID 83448  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Signature(s) of at least one person responsible for forming the limited liability company:

Signature *W. Brad Speakman*  
Typed Name W. Brad Speakman  
Capacity Member

Signature \_\_\_\_\_  
Typed Name \_\_\_\_\_  
Capacity \_\_\_\_\_

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IDAHO SECRETARY OF STATE  
**11/14/2001 05:00**  
CK: NO CK # CT: 153522 BH: 429455  
1 @ 100.00 = 100.00 PROF LLC # 2

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