

FILED EFFECTIVE



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 OCT 27 AM 9:07

 RECEIVED
 SECRETARY OF STATE
 IDAHO

1. The name of the limited liability company is:

Southern Idaho Healthcare Cooperative, L.L.C.

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

450 Falls Avenue, Suite 201, Twin Falls, ID 83301

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

Anne S. Taylor Pitts

3. The mailing address for future correspondence is:

P.O. Box 1901, Twin Falls, ID 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
<u>Robert Ward, M.D.</u>	<u>141 Morrison Street, Twin Falls, ID 83301</u>
<u>Kurt Seppi, M.D.</u>	<u>630 Addison Avenue W, Twin Falls, ID 83301</u>
<u>David Kemp, M.D.</u>	<u>414 Shoup Avenue W, Twin Falls, ID 83301</u>
<u>Blake Johnson, M.D.</u>	<u>714 North College Road, Twin Falls, ID 83301</u>
<u>Brian Fortuin, M.D.</u>	<u>660 Shoshone East, Twin Falls, ID 83301</u>
<u>David McClusky, M.D.</u>	<u>660 Shoshone East, Twin Falls, ID 83301</u>

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

Signature: Typed Name: Robert Ward, M.D.Capacity: Member

Signature: _____

Typed Name: _____

Capacity: _____

Secretary of State use only

 g:\compliance\LLC forms\articles of organization.p65
 Revised 07/2002

 IDAHO SECRETARY OF STATE
 10/27/2005 05:00
 CK: 13294 CT: 72752 RH: 919222
 1 @ 100.00 = 100.00 ORGAN LLC # 2

Web Form

W44/06