



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**  
02 APR 24 AM 8:45  
SECRETARY OF STATE  
STATE OF IDAHO

- The name of the limited liability company is: ALL PRO HEALTH SUPPLY, LLC.
- The street address of the initial registered office is: 1650 W. 1179 N.  
PAUL, ID 83347 and the name of the initial registered agent at the above address is: PERRY VAN TASSELL
- The mailing address for future correspondence: P.O. BOX 608  
BURLEY, IDAHO 83318
- Management of the limited liability company will be vested in:  
Manager(s) ☒ or Member(s) ☐ . (please check the appropriate box)
- 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 members, list the name(s) and address(es) of at least one initial member.

Name

Address

MARTY VAN TASSELL

429 S. CRESTVIEW PAUL, IDAHO 83347

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

Signature Perry Van Tassell

Typed Name PERRY VAN TASSELL

Capacity MEMBER

Signature Marty Van Tassell

Typed Name MARTY VAN TASSELL

Capacity MEMBER

Secretary of State use only

g:\corp\forms\LLC forms\articlesoforganization.pdf  
Revised 01/2001

IDAHO SECRETARY OF STATE  
04/24/2002 05:00  
CK: 1265 CT: 157624 BH: 461365  
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