



# CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

**FILED EFFECTIVE**

2017 MAY 11 AM 9:34

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the professional limited liability company is:

Alpine Family Medicine PUC

2. The complete street and mailing addresses of the principal office is:

1613 West Lake Street, Unit 103, Sandpoint, ID, 83864  
(Street Address)

(Mailing Address, if different)

3. Name and street address of registered agent in Idaho:

Katie Sweeney 556 Old Relic Rd, Bonners Ferry, ID 83805  
(Name) (Address)

4. The name and address of at least one governor of the limited liability company:

Katie Sweeney 556 Old Relic Rd, Bonners Ferry, ID 83805  
(Name) (Address)

Tucker Sweeney 556 Old Relic Rd Bonners Ferry, ID 83805  
(Name) (Address)

(Name)

(Address)

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

556 Old Relic Rd, Bonners Ferry, ID 83805  
(Address)

6. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is:

medicine, nursing

7. Signature of a manager, member, or an organizer.

Printed Name: Katie Sweeney

Signature: [Signature]

Printed Name: Tucker Sweeney

Signature: [Signature]

Secretary of State use only

IDAHO SECRETARY OF STATE

05/11/2017 05:00

CK:324 CT:339452 BH:1583612

1@ 100.00 = 100.00 PROF LLC #2

1@ 20.00 = 20.00 CORP SUR #3

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