



0006245755

**STATE OF IDAHO****Office of the secretary of state, Phil McGrane
CERTIFICATE OF ORGANIZATION LIMITED
LIABILITY COMPANY**

Idaho Secretary of State
PO Box 83720
Boise, ID 83720-0080
(208) 334-2301
Filing Fee: \$100.00

*For Office Use Only***-FILED-**

File #: 0006245755

Date Filed: 5/8/2025 11:49:26 AM

<p>Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)</p> <p>1. Limited Liability Company Name Type of Limited Liability Company Entity name</p> <p>2. The complete street address of the principal office is: Principal Office Address</p> <p>3. The mailing address of the principal office is: Mailing Address</p> <p>4. Registered Agent Name and Address Registered Agent</p>		<p>Standard (filing fee \$100)</p> <p>Professional Limited Liability Company Southern Idaho Emergency Medicine Education PLLC</p> <p>Medicine</p> <p>821 SNAKE RIVER DR HEYBURN, ID 83336</p> <p>821 SNAKE RIVER DR HEYBURN, ID 83336-8001</p> <p>Registered Agent Caleb K Anderson Physical Address: 821 SNAKE RIVER DR HEYBURN, ID 83336-8001 Mailing Address: 821 SNAKE RIVER DR HEYBURN, ID 83336-8001</p>				
<p><input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.</p> <p>5. Governors</p> <table border="1"> <tr> <td>Name</td> <td>Address</td> </tr> <tr> <td>Caleb K Anderson DO</td> <td>821 SNAKE RIVER DR HEYBURN, ID 83336</td> </tr> </table> <p>Signature of Organizer:</p> <p><i>Caleb Karl Anderson</i></p> <p>Sign Here</p>			Name	Address	Caleb K Anderson DO	821 SNAKE RIVER DR HEYBURN, ID 83336
Name	Address					
Caleb K Anderson DO	821 SNAKE RIVER DR HEYBURN, ID 83336					
		<p>05/08/2025</p> <p>Date</p>				