



# **CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY**

11 OCT 20 PM 4:43

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

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

Tina Ellison MD, PLLC

2. The complete street and mailing addresses of the initial designated/principal office:

8090 Watercress Avenue, Nampa, Idaho 83687

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Mark A. Ellison

(Name)

205 N. 10th Street, 4th Floor, Boise, Idaho 83701

(Street Address)

4. The name and address of at least one member or manager of the professional limited liability company:

Name

Address

Tina Ellison

8090 Watercress Avenue, Nampa, Idaho 83687

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

8090 Watercress Avenue, Nampa, Idaho 83687

6. Future effective date of filing (optional): \_\_\_\_\_

7. 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

Signature of a manager, member or authorized person.

Signature Mark A. Ellison

Typed Name: Mark A. Ellison, authorized person

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/20/2011 05:00  
CK: 813358 CT: 172099 BH: 1295071  
1 @ 100.00 = 100.00 PROF LLC # 2

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