

Signature: __

CERTIFICATE OF ORGANIZATION **PROFESSIONAL** LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

FILED EFFECTIVE

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Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate. The name of the professional limited liability company is: SCOTT HUNEYCUTT, MD, PLLC 2. The complete street and mailing addresses of the principal office is: 2240 E. Center St., Pocatello, ID 83201 (Street Address) (Mailing Address, if different) 3. Name and street address of registered agent in Idaho: Eric L. Olsen 505 E. Pershing Ave., Ste. 100, Pocatello, ID 83201 (Name) (Address) The name and address of at least one governor of the limited liability company: Scott Huneycutt, M.D. 2240 E. Center St., Pocatello, ID 83201 (Name) (Address) (Name) (Address) (Address) 5. Mailing address for future correspondence (annual report notices): 2240 E. Center St., Pocatello, ID 83201 (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 Secretary of State use only 7. Signature of a manager, member, or an organizer. IDAHO SECRETARY OF STATE Printed Name 11/03/2015 05:00 CK: PREPAID CT: 270654 BH: 1499044 Signature: 1@ 100.00 = 100.00 PROF LLC #2 10 20.00 = 20.00 EXPEDITE C #3 Printed Name: .

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