

FILED/EFFECTIVE



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is: Southeast Idaho Public Hospital Cooperative, LLC

2. The address of the initial registered office is: 651 Memorial Drive, Pocatello, ID 83201
_____ and the name of the initial registered agent at that address is: Christine Young

3. The mailing address for future correspondence: SIPHC, LLC, c/o Chris Young
651 Memorial Drive, Pocatello, ID 83201

4. Management of the limited liability company will be vested in:
Manager(s) or Member(s) . (please check the appropriate box)

5. 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.

<u>Name</u>	<u>Address</u>
<u>Brenda Rees, Director</u>	<u>651 Memorial Drive, Pocatello, ID 83201</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

Signature Brenda Rees
Typed Name Brenda Rees
Capacity Director

Signature Thomas Skaggs
Typed Name Thomas Skaggs
Capacity Treasurer

g:\corpforms\LLC forms\artoforganization.p65 Revised 01/2001

Secretary of State use only

IDAHO SECRETARY OF STATE
08/24/2001 05:00
CK: 1098 CT: 147634 BH: 415388
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