



**ARTICLES OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

**FILED EFFECTIVE**

2005 MAR 21 AM 10:11

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

Illus Nursing L.L.C.

2. The street address of the initial registered office is:

1135 Falls Avenue American Falls ID 83211

and the name of the initial registered agent at the above address is:

Michael Lynn Crockett

3. The mailing address for future correspondence is:

1135 Falls Avenue American Falls ID 83211

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 member(s), list the name(s) and address(es) of at least one initial member.

Name

Address

Michael Lynn Crockett

1135 Falls Avenue American Falls ID 83211

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

Signature: Michael Lynn Crockett

Typed Name: Michael Lynn Crockett

Capacity: Manager

Secretary of State use only

Signature \_\_\_\_\_

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

Capacity: \_\_\_\_\_

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Revised 07/2002

IDAHO SECRETARY OF STATE  
03/21/2005 05:00  
CK: 3562 CT: 187121 BH: 799785  
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