



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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1. The name of the limited liability company is:

Flight Doctor West, L.L.C.

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

5241 Silver Spur, Boise, ID 83709

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

Tim Charles

3. The mailing address for future correspondence is:

5241 Silver Spur, Boise, ID 83709

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) or 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
<u>Tim Charles</u>	<u>5241 Silver Spur, Boise, ID 83709</u>
<u>Flight Line, Inc.</u>	<u>5241 Silver Spur, Boise, ID 83709</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

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

Signature: [Signature]

Typed Name: Tim Charles

Capacity: MANAGING MEMBER

Signature:  

Typed Name:  

Capacity:  

Secretary of State use only

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