

ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY



(Instructions on back of application)

JAN 28 2 14 PM '00

FILED

1. The name of the professional limited liability company is: Physicians Clinic, PLLC

2. The professional limited liability company is organized for the practice of the profession(s) of: medical practice

3. The address of the initial registered office is 4750 N. Five Mile Road, Boise, Idaho 83713 (not a PO Box)

, and the name of the initial registered agent at that address is Dr. Terry Little

Signature of registered agent: Terry Little

4. Is management of the limited liability company vested in a manager or managers?
 Yes No (check appropriate box)

5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one member.

<u>Name:</u>	<u>Address:</u>
<u>Dr. Terry Little</u>	<u>4750 N. Five Mile Road Boise, ID 83713</u>
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6. Signature(s) of at least one person listed in #6 above:

Terry Little

IDAHO SECRETARY OF STATE only
 01/28/2000 09:00
 LX: 88217 CT: 20168 BH: 285363
 1 @ 100.00 = 100.00 PROF LLC # 2
 W10958

9 Corp forms LLC3 PM6 Revised 6/97