



Revised 08/2015

STATEMENT OF CONVERSION

Pursuant to § 30–22–405, Idaho Code Filing fee: \$30 typed, \$50 not typed

Complete and submit the form in <u>duplicate</u>.

For Office Use Only

-FILED-

File #: 0003351288

Date Filed: 11/19/2018 4:14:00 PM

making this important bu	isiness decision.			
1. CONVERTING ENTITY:				
Name: Ada Vision Center, P.	.A.			
Jurisdiction: Idaho				
Type: Professional Associati	Type: Professional Association (Corporation, Limited Liability Company, Limited Partnership, etc)			
(Corporation, Limited Liability Company, Limited Partnership, etc)				
This is a domestic entity, and this plan of conversion was approved in accordance with § 30–22–403, Idaho				
This is a foreign entity, and this jurisdication of formation.	plan of conversion was approved in accordance with the law of its			
2. CONVERTED ENTITY:				
Name: Ada Vision Center, P	ELO			
Jurisdiction: Idaho				
Type: Professional Limited L	Liability Company Ipany, Limited Partnership, etc)			
(Corporation, Limited Liability Com	pany, Limited Partnership, etc)			
 a. If this is a domestic entity or domestic organic record, or statement of queen 	nestic limited liability partnership, please attach a copy of the entity's public			
•	esignate a registered agent in the space provided:			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(Registered Agent Name)	(Address)			
3. EFFECTIVE DATE OF CONVERSION:	Effective upon filing			
S. ELLEGINE BATE OF GONVERGION.				
	On future date:(Enter date – not more than 90 days in the future)			
e.	Secretary of State use only			
Printed Name: Todd Noble				
Capacity: President, Ada Vision C	Center P.A			

Note: Conversion documents are complex. Please seek appropriate legal and/or financial advice before





CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

		ped, \$120 not typed mit the application in <u>dupl</u> i	icate.	
1.	The name of the professional limited liability company is:			
	Ada Vision Center, PLLC			
2.	The complete street and mailing addresses of the principal office is: 1926 W. State Street, Boise, ID 83702			
	(Street Address)			
	(Mailing Address, if different)			
3.	Name and street address of registered agent <u>in Idaho</u> :			
	Todd A. Noble	1926 W. S	State St., Boise, ID 83702	
	(Name)	(Address)		
4.	The name and address of at least one governor of the limited liability company:			
	Todd A. Noble	1926 W. S	State St., Boise, ID 83702	
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)		
5.	Mailing address for future corresp	ondence (annual report notic	ces):	
	1926 W. State St., Boise, ID 83702			
	(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:			
	Optometry			
7	Ciamatura of a manager man	.h	Secretary of State use only	
7.	Signature of a manager, mem	_		
Pri	inted Name: Todd A. Noble	z, Organizei		
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Toll a Signature: _ Printed Name: _ Signature: _ Rev. 11/2017