



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

10 JUL -7 AM 8:20

(Instructions on back of application)

1. The name of the professional limited liability company is:

SECRETARY OF STATE
STATE OF IDAHO

R C Veterinary Services PLLC

2. The complete street and mailing addresses of the initial designated/principal office:

6427 N. Hillsboro Pl. Boise 83703

(Street Address)

Same

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Dr. Craig A Peterson

(Name)

6427 N. Hillsboro Pl.

(Street Address)

Boise, 83703

4. The name and address of at least one member or manager of the professional limited liability company:

Name

Address

Judy A Peterson

6427 N. Hillsboro Pl

5. Mailing address for future correspondence (annual report notices):

6427 N. Hillsboro Pl. Boise, ID 83703

6. Future effective date of filing (optional): _____

7. 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: Veterinary Medicine

Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature

Craig A Peterson DVM

Typed Name:

Craig A Peterson DVM

Signature

Judy A. Peterson

Typed Name:

Judy A Peterson

Secretary of State use only

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