

FILED EFFECTIVE

ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

04 JUN -1 AM 8:00

SECRETARY OF STATE
STATE OF IDAHO

- The name of the professional limited liability company is:
MERIDIAN ADULT MEDICINE, PLLC
- The professional LLC is organized for the practice in the profession of: MEDICINE
- The address of the initial registered office is: 520 S. EAGLE RD. MERIDIAN, ID 83642
and the name of the initial registered agent is: LOUIS M. SCHLICKMAN, MD
- Management of the professional limited liability company will be vested in:
☐ Manager(s) ☒ Member(s)
- If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.

Name

Address

LOUIS M. SCHLICKMAN, MD

520 S. EAGLE RD. #3217, MERIDIAN, ID 83642

- Signature(s) of at least one person responsible for forming the limited liability company:

Signature

Typed Name LOUIS M. SCHLICKMAN, MD

Capacity MEMBER

Signature

Typed Name

Capacity

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Revised 09/2002
Web Form

IDAHO SECRETARY OF STATE
06/01/2004 05:00
CK: 6175682438SLD CT: 172099 BH: 747845
1 @ 100.00 = 100.00 PROF LLC # 2

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