



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2013 OCT 10 AM 9:15

(Instructions on back of application)

 SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

House Calls Analytics, LLC

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

971 EAST WINDING CREEK DRIVE
(Street Address)

EAGLE, ID 83616
(Mailing Address, if different than street address)

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

DR. STEVEN FULLER
(Name)

971 E. WINDING CREEK DR.
(Street Address)

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

DR. STEVEN FULLER
Name

971 EAST WINDING CREEK DRIVE
EAGLE, ID 83616
Address

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

971 EAST WINDING CREEK DRIVE, EAGLE, ID 83616

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

 Signature Steven Fuller
Typed Name: STEVEN FULLER

 Signature _____
Typed Name: _____

Secretary of State use only

 IDAHO SECRETARY OF STATE
10/10/2013 05:00
CK: 1314 CT: 288458 BH: 1393559
1 @ 100.00 = 100.00 ORGAN LLC # 2

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