



**CERTIFICATE OF ORGANIZATION
PROFESSIONAL
LIMITED LIABILITY COMPANY**

FILED EFFECTIVE

2013 MAY -3 AM 10:42

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the professional limited liability company is
Idaho Neurology, PLLC

2. The complete street and mailing addresses of the initial designated office:
1499 West Hays Street, Boise, ID 83702

(Street Address)
2825 Fort Missoula Road, Suite 121, Missoula, MT 59804

(Mailing Address, if different than street address)

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

Thomas Swanson

(Name)

1499 West Hays Street, Boise, ID 83702

(Street Address)

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

Name

Thomas Swanson

Address

1499 West Hays Street, Boise, ID 83702

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

1499 West Hays Street, Boise, ID 83702

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: Medicine

Signature of a manager, member or authorized person.

Secretary of State use only

Signature

Typed Name: Thomas Swanson

Signature _____

Typed Name: _____

IDaho SECRETARY OF STATE
05/03/2013 05:00
CX: 2008 CT: 202710 BH: 1372200
1 E 100.00 = 100.00 PROF LLC # 2
1 E 20.00 = 20.00 EXPEDITE C # 3