

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 DEC 28 PM 12:56

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

INDEPENDENT HEALTHCARE SOLUTIONS, LLC

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

865 SHELIA LANE, MCCALL, ID 83638

(Street Address)

PO BOX 384, MCCALL, ID 83638

(Mailing Address, if different than street address)

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

ALANA ERICKSON

(Name)

865 SHELIA LANE, MCCALL, ID 83638

(Street Address)

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

Name

Address

ALANA ERICKSON

PO BOX 384, MCCALL, ID 83638

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

PO BOX 384, MCCALL, ID 83638

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: ALANA ERICKSON

Signature

Typed Name:

Secretary of State use only

cert_org_llc Rev. 07/2010

IDAHO SECRETARY OF STATE
12/28/2011 05:00
CK: 862841 CT: 172099 BN: 1303526
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W109487