

FILED EFFECTIVE



# **CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY**

09 FEB 19 AM 8:56

 SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

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

Action Emergency Medical Services, PLLC

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

1054 Terra Drive, Moscow, Idaho, 83843

(Street Address)

Same as Above

(Mailing Address, if different than street address)

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

Frank Reiser, MD

(Name)

1054 Terra Drive, Moscow, Idaho, 83843

(Street Address)

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

**Name**
**Address**

Frank Reiser, MD

1054 Terra Drive, Moscow, Idaho, 83843

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

1054 Terra Drive, Moscow, Idaho, 83843

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: Physician

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

Typed Name:

Frank Reiser, MD

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE  
02/19/2009 05:00  
CK: 1011 CT: 234284 BH: 1157677  
1 @ 100.00 = 100.00 PROF LLC # 2

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