Printed Name: \_

Signature: \_

## CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>.

## FILED EFFECTIVE

2017 JUL 18 AM 8: 31

SECRETARY OF STATE STATE OF IDAHO

W186368

1.	The name of the professional limited liability company is:  Black Canyon Medical Group LLC		
2.	The complete street and mailing addresses of the principal office is: 426 Hwy 16 Emmett, ID 83617		
	(Street Address)		
	(Mailing Address, d different)		
3.	Name and street address of registered agent <u>in Idaho</u> :		
	Tina McGuffey	1500 Gem Estate	s Ln, Emmett, ID 83617
	(Name)	(Address)	<del></del>
4.	The name and address of at least one governor of the limited liability company:		
	Tina McGuffey	1500 Gem Estates Ln Emmett ID 83617	
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	1500 Gem Estates Ln Emmett, ID 83617		
	(Address)		
6.	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		
7.	Signature of a manager, member, or an organizer.		Secretary of State use only
	Tina McGuffey	and the second second	IDANO SECRETARY OF STATE 07/18/2017 05:00
Pri	nted Name:		CK:1335 CT:342807 BH:1594079 10 100.00 = 100.00 PROF LLC #2
Sig	griature:	¥	16 100.00 - 100.00 PXOS DIP #5

Rev. 08/2015