

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED/EFFECTIVE

(Instructions on back of application) 01 APR -4 AM 8:45

1. The name of the limited liability company is: ROCKY MOUNTAIN MEDICINE, LLC
2. The address of the initial registered office is: 329 SOUTH WOODRUFF AVE, IDAHO FALLS, ID
83401 and the name of the initial registered agent at that address is: DR. DAVID F DANIELS

Signature of registered agent: _____

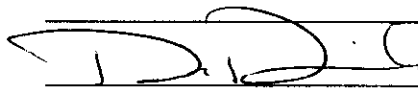
3. Management of the limited liability company will be vested in:

Manager(s) ☒ or Member(s) ☐ . (Please check the appropriate box)

4. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the members, list the name(s) and address(es) of at least one initial member.

<u>Name</u>	<u>Address</u>
<u>DR. DAVID F DANIELS</u>	<u>128 K STREET, REXBURG, ID 83440</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

5. Signature of at least one person responsible for forming the limited liability company:



IDAHO SECRETARY OF STATE only

04/04/2001 09:00
CK: 1675 CT: 144557 BH: 389005

1 @ 100.00 = 100.00 ORGAN LLC # 2

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