

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

PILED/EFFECTIVE

(Instructions on back of application)

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STATE OF IDAHO

1.	The name of the limited liability company is: HEMATOLOGY & ONCOLOGY CENTER OF EASTERN IDAHO, LLC
2.	The address of the initial registered office is: 3200 Channing Way, Suite A302,
	Idaho Falls, Idaho 83404 and the name of the initial registered agent at that address is: Kevin P. Mulvey
3.	The mailing address for future correspondence: 3200 Channing Way, Suite A302,
	Idaho Falls, Idaho 83404
4.	Management of the limited liability company will be vested in:
	Manager(s) x or Member(s). (please check the appropriate box)
5.	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. Name Address
	Kevin P. Mulvey 3200 Channing Way, Swite A302 Tolaho Falls/ID 83404
6.	Signeture of at least one person responsible for forming the limited liability company: IDANO SECRETARY OF STATE Secretary of State use only Secretar