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CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2008 OCT 22 AM 9:31
SECRETARY OF STATE
STATE OF IDAHO

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

Neonatal Associates, PLLC

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

5365 S. Tappan Falls Drive, Idaho Falls, Idaho 83406

(Street Address)

(Mailing Address, if different than street address)

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

Shannon Jenkins

(Name)

5365 S. Tappan Falls Drive, Idaho Falls, Idaho 83406

(Street Address)

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

Name

Address

Shannon Jenkins, D.O.

5365 S. Tappan Falls Drive, Idaho Falls, Idaho 83406

Travis Anschutz, M.D.

9936 South Henry Creek Road, Idaho Falls, Idaho 83406

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

5365 S. Tappan Falls Drive, Idaho Falls, Idaho 83406

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:
- Medicine

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:

Shannon Jenkins

Signature

Typed Name:

Secretary of State use only

W78414

IDAHO SECRETARY OF STATE
10/22/2008 05:00
CK: 163794 CT: 172899 BH: 1141212
1 @ 100.00 = 100.00 PROF LLC # 2

If completed, LLC formation fee, \$100.00, must be paid to the Secretary of State, 10/22/2008