

251

**CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

**FILED EFFECTIVE**

2013 OCT 21 AM 9:33

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Curative Medical, LLC

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

6713 N. Moon Drummer Way, Meridian, ID 83646

(Street Address)

(Mailing Address, if different than street address)

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

Doug Holke  
(Name)6713 N Moon Drummer Way, Meridian ID 83646  
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Doug Holke</u>	<u>6713 N Moon Drummer Way, Meridian ID 83646</u>
<u>Terri Martin</u>	<u>"</u>
_____	_____
_____	_____
_____	_____

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

6713 N Moon Drummer Way, Meridian ID 83646

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name:

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/21/2013 05:00  
CK: 113 CT: 288798 BH: 1394798  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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