

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability comp	oany is:		51711 51 101110
	Accident Injury Consulting Group, I	LLC		
2.	The street address of the initial registered office is:			
	6720 Overland Rd, Boise, Idaho 83709			
	and the name of the initial registered	agent at the	above address	is:
	Bryan Storer			
3.	The mailing address for future correspondence is:			
	6720 Overland Rd, Boise, Idaho 83709			
4.	Management of the limited liability company will be vested in:			
	Manager(s) ✓ or Member(s) ☐	(please chec	ck 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 member(s), list the name(s) and address(es) of at least one initial member.			
	Name Address			
	Bryan Storer	6720 Overland Rd, Boise, Idaho 83709		
		,		
6	Signature of at least one person responsible for forming the limited liability company:			
	Signature: Bright State use only			
	Typed Name: Bryan Storer		iton.p65	detaily of otate use only
	Capacity: Manager		oforganizal	
	Signature		rpVorms\LC forms\artaclorgenzation p65 Revised 07/2002 Revised 07/2002	IBAHO SECRETARY OF STATE
	Typed Name:		forms/LLC forms/ Revised 07/2002	CK: 1769 CT: 175768 BH: 72
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