

ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

01 DEC 13 PM 1: 13

STATE OF IDAHO

1.	The name of the professional limited liability	
	Lake Pend Oreille Emergency Medic	ine, P.L.L.C.
2.	The professional LLC is organized for the p	ractice in the profession of: medicine
3.	The address of the initial registered office is	s: 3734 Lakeshore Drive Sagle, ID 83860
	and the name of the initial	registered agent is: Ken Gramyk, M.D.
4.	Management of the professional limited liab	oility company will be vested in:
	☐ Manager(s) 🖾 M	ember(s)
5.	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.	
	Name	Address
	Ken Gramyk, M.D.	3734 Lakeshore Drive Sagle, ID 83860
	4	
6.	Signature(s) of at least one person responsit	ble for forming the limited liability company:
;	Signature Phajkra	
	Typed Name Ken Gramyk, M.D.	. p6.5
	Capacity <u>Member</u>	IDAHO SECRETARY OF STATE 12/13/2001 05:00 CK: 2396 CT: 154591 BH: 434482 1 6 180.06 = 160.06 PROF LLC # 2
	Signature	IDAHO SECRETARY OF STATE
	Signature Typed Name	IDAHO SECRETARY OF STATE 12/13/2001 95:00
	Capacity	CK: 2396 CT: 154591 BH: 434482 1 @ 180.00 = 100.00 PROF LLC W 8

W 17382