Signature: __

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>.

FILED EFFECTIVE

2017 AUG 21 AM 10: 25

SECRETARY OF STATE STATE OF IDAHO

W188012

1.	The name of the professional limited liability company is: IDAHO SPORTS & SPINE MSO LLC			
2.	The complete street and mailing addresses of the principal office is: 950 HOSPITAL WAY, SUITE A, POCATELLO, ID 83201			
	(Street Address)			
	(Mailing Address, if different)			
3.	Name and street address of registered agent <u>in Idaho</u> :			
	GREGORY FORD 3805 RIDGEWOOD RD., POCATELLO, ID 83201		OOD RD., POCATELLO, ID 83201	
	(Name)	(Address)		
4.	The name and address of at least o	The name and address of at least one governor of the limited liability company:		
	GREGORY FORD	3805 RIDGEWOOD RD., POCATELLO, ID 83201		
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)		
5.	Mailing address for future correspondence (annual report notices):			
	950 HOSPITAL WAY, SUITE A, POCATELLO, ID 83201			
	(Address)			
6.	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:			
	Me	dicine	<u> </u>	
7.	Signature of a manager, member	er, or an organizer.	Secretary of State use only	
	GREGORY FORD		IDAHO SECRETARY OF STATE	
Pri	nted Name:	to the	08/21/2017 05:00 CK:3869 CT:344484 BH:1599235	
Sig	gnature:	ty prof	10 100.00 = 100.00 PROF LLC #2	
Pri	inted Name:	·	}	