

FILED EFFECTIVE



ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

05 MAY -8 PM 3: 52

SECRETARY OF STATE
STATE OF IDAHO

- The name of the professional limited liability company is:
KOOTENAI WELLNESS CENTER, PLLC
- The professional LLC is organized for the practice in the profession of: MEDICINE
- The address of the initial registered office is: 515 N 27TH STREET, BOISE, ID 83702
and the name of the initial registered agent is: MOLLY O'LEARY
- Management of the professional limited liability company will be vested in:
☒ Manager(s) ☐ Member(s)
- 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
ALEX P. BORMANN	1045 N 16th EAST, MTN HOME, ID 83647
_____	_____
_____	_____
_____	_____
_____	_____

- Signature(s) of at least one person responsible for forming the limited liability company:

Signature *Molly O'Leary*
 Typed Name Molly O'Leary
 Capacity Organizer

Signature _____
 Typed Name _____
 Capacity _____

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 Revised 09/2002
 Web Form

IDAHO SECRETARY OF STATE *X*
 05/08/2006 05:00
 CK: 3329 CT: 185969 BH: 953652
 1 @ 100.00 = 100.00 PROF LLC # 2

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