



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**  
06 AUG 22 PM 3: 14

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Blackfoot Medical Center, LLC

2. The street address of the initial registered office is:

98 Poplar Street, Blackfoot, Idaho 83221

and the name of the initial registered agent at the above address is:

Louis Kraml

3. The mailing address for future correspondence is:

98 Poplar Street, Blackfoot, Idaho 83221

4. Management of the limited liability company will be vested in:

Manager(s) ☒ or Member(s) ☐ (please check 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

Louis Kraml

98 Poplar Street, Blackfoot, Idaho 83221

6. Signature of at least one person responsible for forming the limited liability company:

Signature: [Signature]

Typed Name: Brian C. Larsen

Capacity: Organizer

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

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08/22/2006 05:00  
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