

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 MAY -7 PM 4: 50

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Limbology Amputee Services LLC

2. The complete street and mailing addresses of the initial designated/principal office:

7339 Newbrooke Drive, Nampa, Idaho 83687

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Judy Kienzle

(Name)

7339 Newbrooke Drive, NAMPA, Idaho 83687 (County of Ada)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name**Address**

Samantha Nicole Tucker

7339 Newbrooke Drive, Nampa, Idaho 83687

5. Mailing address for future correspondence (annual report notices):

7339 Newbrooke Drive, Nampa, Idaho 83687

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Cheyenne Moseley, Assistant
Secretary, LegalZoom.com, Inc.

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

05/07/2014 05:00

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