



ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED
DEC 22 AM 9:52
STATE OF IDAHO

1. The name of the professional limited liability company is: Eastern Idaho Sports Medicine and Orthopedic Center, PLLC
2. The professional limited liability company is organized for the practice of the profession(s) of: medicine
3. The address of the initial registered office is 477 Shoup Avenue, Suite 109,
Idaho Falls, ID 83402 (not a PO Box), and the name of the initial registered agent at that address is Gregory J. Ehardt
Signature of registered agent: Gregory J. Ehardt
4. Is management of the limited liability company vested in a manager or managers?
☒ Yes ☐ No (check appropriate box)
5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one member.

<u>Name:</u>	<u>Address:</u>
<u>Ronald D. Wheeler, M.D.</u>	<u>2860 Channing Way, Suite 116, Idaho Falls, ID 83404</u>
_____	_____
_____	_____
_____	_____
_____	_____
6. Signature(s) of at least one person listed in #5 above. Ronald D. Wheeler

Secretary of State use only
IDAHO SECRETARY OF STATE

12/22/2000 09:00
CK: 0521 CT: 13908 BH: 368548

I @ 100.00 = 100.00 PROF LLC # 3

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