



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

10 DEC 15 AM 8:53

1. The name of the limited liability company is:

FAIRCHILD PEDIATRIC DENTISTRY LLC

SECRETARY OF STATE
STATE OF IDAHO

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

406 WEST 260 NORTH

(Street Address)

BLACKFOOT, IDAHO 83221

(Mailing Address, if different than street address)

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

JAMIE FAIRCHILD

(Name)

406 WEST 260 NORTH BLACKFOOT, ID 83221

(Street Address)

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

Name

Address

JAMIE FAIRCHILD

406 WEST 260 NORTH BLACKFOOT, ID 83221

BRAYDEN FAIRCHILD

406 WEST 260 NORTH BLACKFOOT, ID 83221

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

406 WEST 260 NORTH BLACKFOOT, IDAHO 83221

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: MANAGING MEMBER208-

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
12/15/2010 05:00
CK: 1134 CT: 253522 RH: 1258940
1 @ 100.00 = 100.00 ORGAN LLC # 2

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