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# CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00

Complete and submit the application in duplicate.

FILED EFFECTIVE

2015 JUL 30 PM 4:40

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the professional limited liability company is:

Byrd Dentistry, PLLC

2. The complete street and mailing addresses of the principal office is:

608 Northwest Blvd, #300Coeur d'Alene ID 83814

(Street Address)

(City)

(State)

(Zipcode)

(Mailing Address, if different)

(City)

(State)

(Zipcode)

3. Name and street address of registered agent in Idaho:

Eleven-Fourteen, Inc.608 Northwest Blvd., #300Coeur d'AleneID83814

(Name)

(Address)

(City)

(State)

(Zipcode)

4. The name and address of at least one governor of the limited liability company:

Benjamin Luke Byrd 432 Sorensen WayMadisonTN37115

(Name)

(Address)

(City)

(State)

(Zipcode)

(Name)

(Address)

(City)

(State)

(Zipcode)

(Name)

(Address)

(City)

(State)

(Zipcode)

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

608 Northwest Blvd, #300Coeur d'AleneID83814

(Address)

(City)

(State)

(Zipcode)

6. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is:

Dentistry

7. Signature of a manager, member, or an organizer.

Printed Name: Benjamin Luke ByrdSignature: [Signature]

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Rev. 07/2016

Secretary of State use only

IDAHO SECRETARY OF STATE

07/30/2015 05:00

CK:3075772 CT:172099 BH:1486090

1@ 100.00 = 100.00 PROF LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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