



AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 MAY 18 AM 9:47

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

WEST VALLEY ENDODONTICS LLC

2. The name of the limited liability company is amended to read:

3. The date the certificate of organization was originally filed : 06/23/14

4. The complete street and mailing addresses of the designated principal office is amended to:

1217 N JACOB ALCOTT WAY, NAMPA, IDAHO 83687

5. The mailing address for future correspondence (annual reports) is amended to:

1217 N JACOB ALCOTT WAY, NAMPA, IDAHO 83687

6. The name and address of the managers/members shall be amended as follows:

| Name | Address | Add | Delete | Other |
|---------------|-----------------------------|--------------------------|-------------------------------------|-------|
| BRENT CHAPMAN | 1201 JACOB ALLCOTT WY #1217 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| ADAM SHIPP | 1201 JACOB ALLCOTT WY #1217 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| BRUCE NEWCOMB | 1201 JACOB ALLCOTT WY #1217 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

7. Signature of an authorized person.

Signature

Hilary Dunstan

Typed Name

Signature

Typed Name

Secretary of State use only
IDAHO SECRETARY OF STATE

05/18/2015 05:00

CK:2656 CT:252404 RH:1475966
18 30.00 = 30.00 ORGAN AMEN #2

W139341

| NAME | ADDRESS | ADD | DELETE |
|------------------------|------------------------------------|-----|--------|
| HILARY DUNSTAN | 1201 JACOB ALLCOTT WY #1217 | | X |
| BRENT CHAPMAN, DDS, PC | 1217 N JACOB ALCOTT WAY, NAM 83687 | X | |
| ADAM SHIPP, DMD, MS PC | 1217 N JACOB ALCOTT WAY, NAM | X | |
| BRUCE NEWCOMB, LLC | 1217 N JACOB ALCOTT WAY, NAM | X | |
| HILARY DUNSTAN, LLC | 1217 N JACOB ALCOTT WAY, NAM | X | |