



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2007 JUL -9 AM 8:19

FILED EFFECTIVE

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Premier Dental Lab LLC

2. The street address of the initial registered office is:

388 Joan, Idaho Falls, ID 83401

and the name of the initial registered agent at the above address is:

Anthony W. Perez

3. The mailing address for future correspondence is:

388 Joan, Idaho Falls, ID 83401

4. Management of the limited liability company will be vested in:

Manager(s) ☒ or Member(s) ☐ (please check the appropriate box)

5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name	Address
<u>Anthony W. Perez</u>	<u>388 Joan, Idaho Falls, ID 83401</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Signature of at least one person responsible for forming the limited liability company:

Signature: [Signature]
 Typed Name: Anthony W. Perez
 Capacity: Owner

Secretary of State use only

Signature: _____
 Typed Name: _____
 Capacity: _____

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Revised 07/2002

IDAHO SECRETARY OF STATE
 07/10/2007 05:00
 CK: 1758 CT: 215242 BH: 1064868
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