



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 MAY 11 AM 8:56

**SECRETARY OF STATE
STATE OF IDAHO**

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

Leavitt Family Dentistry, PLLC

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

3326 4th Street, Ste. 1, Lewiston, Idaho 83501

(Street Address)

(Mailing Address, if different)

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

Erin Leavitt, DMD

6378 Hepton Lane, Lewiston, Idaho 83501

(Name)

(Address)

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

Erin Leavitt, DMD

6378 Hepton Lane, Lewiston, Idaho 83501

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

3326 4th Street, Ste. 1, Lewiston, Idaho 83501

(Address)

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



Secretary of State use only

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

Printed Name: Erin Leavitt, DMD

Signature:

Printed Name: _____

Signature: _____

IDAHO SECRETARY OF STATE

05/11/2016 05:00

CK:11133 CT:9686 BH:1528049
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