





STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (s	ee Expedited (+\$40; filing fee \$140)	
descriptions below)		
1. Limited Liability Company Name	Professional Limited Liability Company	
Type of Limited Liability Company		
Entity name	Tyler Kent Marlowe DDS PLLC	
Profession		
The business is organized to practice the profession of:	Dentistry	
2. The complete street address of the principal office is:		
Principal Office Address	TYLER K MARLOWE DDS	
	1246 YELLOWSTONE AVE	
	STE D3 POCATELLO, ID 83201	
0.77		
3. The mailing address of the principal office is: Mailing Address	TYLER K MARLOWE DDS	
Mailing Address	519 S 19TH AVE	
	POCATELLO, ID 83201-3462	
4. Registered Agent Name and Address		
Registered Agent	Registered Agent	
g	Tyler K Marlowe	
	Physical Address:	
	TYLER K MARLOWE DDS	
	519 S 19TH AVE	
	POCATELLO, ID 83201-3462	
	Mailing Address: TYLER K MARLOWE DDS	
	519 S 19TH AVE	
	POCATELLO, ID 83201-3462	
I affirm that the registered agent appointed has conse	ented to serve as registered agent for this entity.	
5. Governors		
Name	Address	
'	LER K MARLOWE DDS	
	9 S 19TH AVE	
PC	CATELLO, ID 83201	
Signature of Organizer:		
Tyler Kent Marlowe DDS	03/27/2025	
Tyler Kent Hanowe BBS	,,	