

## CERTIFICATE OF ORGANIZATION **PROFESSIONAL** LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

2014 AUG 15 AM 10: 48

	OPAACTION OF STREET
(Instructions on back of applicat  1. The name of the professional limited liability or	. SIMIL OF IDADO
TDC Jerome, 8	PLLC
2. The complete street and mailing addresses of	the initial designated office:
119 Country Lane, Jerome, Idaho 83338 (Street Address) 119 Country Lane, Jerome, Idaho 83338 (Mailing Address, if different than street address)	
3. The name and complete street address of the i	registered agent:
Don S. Wyatt 119 County (Name) (Street Add	/ Lane, Jerome, Idaho 83338 ress)
The name and address of at least one member liability company:	
Name Don S. Wyatt DDS, PA 119 County	Address / Lane, Jerome, Idaho 83338
5. Mailing address for future correspondence (and 119 County Lane, Jerome, Idaho 83338	nual report notices):
. Future effective date of filing (optional):	• .
7. The limited liability company is a professional of professions for which members are duly licensed professional services is: Dentistry	company, and the principal profession or do or otherwise legally authorized to render
ignature of a manager, member or authorized	I
~ 1	Secretary of State use only
gnature discounting the second	
/ped Name: Brian J. William, Agent	IDAHO SECRETARY OF STATE
gnature	08/15/2014 05:00
rped Name:	CR:2141842 CT:172099 BH:14 16 100.00 = 100.00 PROF LI

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