



ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

2004 AUG 12 PM 1:16

SECRETARY OF STATE
STATE OF IDAHO

- The name of the professional limited liability company is:
MERIDIAN PEDIATRIC DENTISTRY PLLC
- The professional LLC is organized for the practice in the profession of: DENTISTRY
- The address of the initial registered office is: 1558 N CRESTMONT DR STE A Boise ID
and the name of the initial registered agent is: TOBY MERRIMAN
- Management of the professional limited liability company will be vested in:
☐ Manager(s) ☒ Member(s)
- If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.

Name	Address
TOBY MERRIMAN	2021 N STONEVIEW PL BOISE ID 83702
_____	_____
_____	_____
_____	_____
_____	_____

- Signature(s) of at least one person responsible for forming the limited liability company:

Signature
Typed Name TOBY MERRIMAN
Capacity _____

Signature _____
Typed Name _____
Capacity _____

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Revised 09/2002

W32548
IDAHO SECRETARY OF STATE
08/12/2004 05:00
CK: 81211585105SLD CT: 172899 DM: 768578
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