



0004027899

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***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-**

File #: 0004027899

Date Filed: 10/8/2020 8:18:14 AM

Certificate of Organization Limited Liability Company					
Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$100)				
1. Limited Liability Company Name					
Type of Limited Liability Company	Limited Liability Company				
Entity name	HOOVER DENTISTRY LLC				
2. The complete street address of the principal office is:					
Principal Office Address	DR. JEFF HOOVER 1520 ELK CREEK DRIVE IDAHO FALLS, ID 83404				
3. The mailing address of the principal office is:					
Mailing Address	DR. JEFF HOOVER 1520 ELK CREEK DR IDAHO FALLS, ID 83404-8322				
4. Registered Agent Name and Address					
Registered Agent	PORTER CLAYTON Registered Agent Physical Address 3456 E 17 ST SUITE 180 AMMON, ID 83406 Mailing Address PO BOX 3093 IDAHO FALLS, ID 83403-3093				
<input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.					
5. Governors					
<table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>HOOVERS, CHTD</td><td>DR. JEFF HOOVER 1520 ELK CREEK DRIVE IDAHO FALLS, ID 83404</td></tr></tbody></table>		Name	Address	HOOVERS, CHTD	DR. JEFF HOOVER 1520 ELK CREEK DRIVE IDAHO FALLS, ID 83404
Name	Address				
HOOVERS, CHTD	DR. JEFF HOOVER 1520 ELK CREEK DRIVE IDAHO FALLS, ID 83404				
Signature of Organizer:					
<u>JEFFREY HOOVER</u>	<u>10/08/2020</u>				
Sign Here	Date				

B0544-0368 10/08/2020 11:04 AM Received by ID Secretary of State Lawrence Denney