



# 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 NOV -2 AM 8:56

SECRETARY OF STATE  
STATE OF IDAHO

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

Sharp Toothpick, PLLC

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

5530 Tappan Falls Dr. Idaho Falls, ID 83406

(Street Address)

PO Box 2162 Idaho Falls, ID 83403

(Mailing Address, if different)

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

Scott Pickett

5530 Tappan Falls Dr. Idaho Falls, ID 83406

(Name)

(Address)

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

Scott Pickett

5530 Tappan Falls Dr. Idaho Falls, ID 83406

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

PO Box 2162 Idaho Falls, ID 83406

(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

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

Scott Pickett, DDS

Printed Name:

Signature:

Printed Name:

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

11/02/2016 05:00

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