



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

2011 AUG 12 PM 12:59

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

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

Platinum Dental PLLC

2. The complete street and mailing addresses of the initial designated/principal office:

329 E. Logan St., Caldwell, ID 83605

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Richard Davis

(Name)

329 E. Logan St., Caldwell, ID 83605

(Street Address)

4. The name and address of at least one member or manager of the professional limited liability company:

Name

Address

Richard Davis

329 E. Logan St., Caldwell, ID 83605

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

329 E. Logan St., Caldwell, ID 83605

6. Future effective date of filing (optional):

7. 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: General Dentistry

Signature of a manager, member or authorized person.

Signature

Typed Name: Richard Davis

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
08/12/2011 05:00  
CK: 756441 CT: 172099 BH: 1286320  
1 @ 100.00 = 100.00 PROF LLC # 2

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