





STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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File #: 0005661835

Date Filed: 3/28/2024 1:34:39 PM

Profession The business is organized to practice the profession of: 2. The complete street address of the principal office is: Principal Office Address 3. The mailing address of the principal office is: Mailing Address 4. Registered Agent Name and Address Registered Agent	Professional Limited Liability Company JASON CHAMPAGNE IDAHO 4, PLLC Dentistry 255 GLENDALE AVE SUITE 3 SPARKS, NV 89431 255 GLENDALE AVE STE 3 SPARKS, NV 89431-5777 C T CORPORATION SYSTEM
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Mailing Address 4. Registered Agent Name and Address Registered Agent	STE 3 SPARKS, NV 89431-5777 C T CORPORATION SYSTEM
4. Registered Agent Name and Address Registered Agent	STE 3 SPARKS, NV 89431-5777 C T CORPORATION SYSTEM
4. Registered Agent Name and Address Registered Agent	SPARKS, NV 89431-5777 C T CORPORATION SYSTEM
Registered Agent	
· ·	
	Commercial Registered Agent
	Physical Address
	1555 W SHORELINE DR
	STE 100 BOISE, ID 83702
	Mailing Address
	1555 W SHORELINE DR
	STE 100
	BOISE, ID 83702
■ I affirm that the registered agent appointed has consented to	o serve as registered agent for this entity.
5. Governors	
Name	Address
JASON CHAMPAGNE 25	55 GLENDALE AVE
S	UITE 3
S	PARKS, NV 89431

JASON CHAMPAGNE

Sign Here

03/28/2024

Date