



0004025229

**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 #: 0004025229

Date Filed: 10/6/2020 8:40:20 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	LEAP DENTAL LLC				
2. The complete street address of the principal office is:					
Principal Office Address	3456 E 17 ST STE 180 AMMON, ID 83406				
3. The mailing address of the principal office is:					
Mailing Address	PO BOX 3093 IDAHO FALLS, ID 83403-3093				
4. Registered Agent Name and Address					
Registered Agent	Registered Agent BRIAN WESTOVER Physical Address: 3456 E 17 ST STE 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>BRIAN WESTOVER</td><td>PO BOX 3093 IDAHO FALLS, ID 83403-3093</td></tr></tbody></table>		Name	Address	BRIAN WESTOVER	PO BOX 3093 IDAHO FALLS, ID 83403-3093
Name	Address				
BRIAN WESTOVER	PO BOX 3093 IDAHO FALLS, ID 83403-3093				
Signature of Organizer:					
<u>BRIAN WESTOVER</u>	<u>10/06/2020</u>				
Sign Here	Date				

B0543-5866 10/06/2020 8:42 AM Received by ID Secretary of State Lawrence Denney