



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2015 MAR 16 PM 2:14

1. The name of the limited liability company is:

HD Boise Dental, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

1212 N. Cole Road

(Street Address)

Boise, Idaho 83704

(Mailing Address, if different than street address)

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

Business Filings Incorporated

(Name)

921 South Orchard Street, Suite G, Boise, ID 83705

(Street Address)

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

NameAddress

Chayse Myers, Manager

780 N. 760 E., St. George, UT 84790

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

1212 N. Cole Road, Boise, ID 83704

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Chayse Myers

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/16/2015 05:00

CK:2666974 CT:172099 BH:1466338

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

cert_org_llc Rev. 07/2010

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