

Signature: ___

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE
2016 JUN 30 AM 9: 07
SECRETARY OF STATE
STATE OF IDAHO

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>.

1.	The name of the professional limited liability company is: Boise Toothtown Dentistry For Kids, PLLC The complete street and mailing addresses of the principal office is: 13014 W. Persimmon Lane		
2.			
	(Street Address) Boise, Idaho 83713		
	Mailing Address if different)		
3.	Name and street address of registered agent in Idaho:		
	Garth Stoddard 13014 W. Persimmon Lane, Boise, Idaho 83713		
	(Nanie)	(Address)	
4.	The name and address of at least one requests at the limited light was a second		
	The name and address of at least one governor of the limited liability company:		
	Garth Stoddard	13014 W. Persimmon Lane, Boise, Idaho 83713 (Address)	
		(Addition)	
	(Name)	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	13014 W. Persimmon Lane, Boise, Idaho 83713		
	(Aridress)		
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 manager		Secretary of State use only
			IDAHO SECRETARY OF STATE
Pri	inted Name: Scott Kumpf		06/30/2016 05:00
Signature:			CK:6916 CT:326284 BH:1535685 1@ 100.00 = 100.00 PROF LLC #2 1@ 20.00 = 20.00 EXPEDITE C #3
Printed Name:			1,1668437