



0005992815

**STATE OF IDAHO****Office of the secretary of state, Phil McGrane  
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 #: 0005992815

Date Filed: 11/24/2024 4:31:03 PM

## Certificate of Organization Limited Liability Company

Select one: Standard, Expedited or Same Day Service (see descriptions below)      Expedited (+\$40; filing fee \$140)

## 1. Limited Liability Company Name

Type of Limited Liability Company

Professional Limited Liability Company

Entity name

Caroline Irons DMD PLLC

## Profession

The business is organized to practice the profession of:

Dentistry

## 2. The complete street address of the principal office is:

Principal Office Address

445 E TRACKSTAND LN  
GARDEN CITY, ID 83714

## 3. The mailing address of the principal office is:

Mailing Address

445 E TRACKSTAND LN  
GARDEN CITY, ID 83714-1613

## 4. Registered Agent Name and Address

Registered Agent

Registered Agent

Zachary Irons

Physical Address:

445 E TRACKSTAND LN  
GARDEN CITY, ID 83714

Mailing Address:

445 E TRACKSTAND LN  
GARDEN CITY, ID 83714-1613

☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

## 5. Governors

Name	Address
Caroline Irons	445 E TRACKSTAND LN GARDEN CITY, ID 83714

## Signature of Organizer:

11/24/24  
Date

## Print &amp; Mail Enclosures

☒ I understand the document can ONLY be filed if the following items are included:

Payment in the amount of \$100.00 (if expedited, \$140; if 24 hours processing, \$200) - checks payable to the Secretary of State, signed and recently dated.

This filing form (submit within 30 days) **with the required signature(s).**

If you are submitting a correction, return the correction letter **with** your updated document.



STATEMENT OF DOMESTICATION

Pursuant to § 30-22-505, Idaho Code

1. Name, jurisdiction and type of the domesticating entity:

Name: Caroline Irons DMD PLLC  
Jurisdiction: Mississippi  
Type of Entity: PLLC

2. Name, jurisdiction and type of the domesticated entity:

Name: Caroline Irons DMD PLLC  
Jurisdiction: Idaho  
Type of Entity: PLLC

3. Effective date of domestication: Upon filing or  
Date: \_\_\_\_\_

(This date may not be more than ninety (90) days after the date of filing.)

- ☒ (4) the domesticating entity is a foreign entity, and the domestication is approved in accordance with the law of its jurisdiction of formation.
- ☒ (5) the domesticated entity is a domestic filing entity and the plan of domestication is approved in accordance with this part, and attached herewith, the text of its public organic document.

☒ ~~the domesticated entity is a foreign entity that is not a registered foreign entity and designates a registered agent. The name and address is:~~ CPI 11-24-24

Name: N/A  
Address: N/A

Signature of Domesticating Entity:

Caroline P. Irons 11-24-24

Caroline P. Irons  
Print name

Fee: \$30.00