

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2012 SEP 26 AM \$ 16

(Instructions on back of application)

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1.	The name of the professional limited liability company is:			SMEGRIA
	Riverview Dental PUC			
2.	The complete street and mailing addresses of the initial designated office:			
	1175 Parkcenter Blvd, Boise, Idaho 83706			
	(Street Address) 2635 N Devlin Ave, Meridian, Idaho 83646 (Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	Quinn Brown	2635 N Devlin Ave, Meridian, Idaho 83646		6
	(Name)	(Street Address)		
4.	The name and address of at le liability company:	ast one member or m	anager of the profes	sional limited
	Name	_	<u>Address</u>	
	Quinn Brown	2635 N Devlin Ave, Meridian, Idaho 83646		6
5.	Mailing address for future correspondence (annual report notices): 2635 N Devlin Ave, Meridian, Idaho 83646			
6.	Future effective date of filing (optional):			
7.	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			
_	nature of a manager, membe son.	r or authorized		
•			Secretary of State	e use only
Sig	nature <u>llu B</u>	· .		
	ed Name: Quinn Brown			
	nature			ETARY OF STATE
	ed Name:		CK: 1087 CT: 2	012 05:00 74666 BH: 1341344 88.80 PROF LLC # 2
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