

ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

02 MOV 12 4H 11: 34

STATE OF IDAHO

(Instructions on back of application)

1.	The name of the professional limited liability co		
2.	The professional LLC is organized for the prac	etice in the profession of:dentistry	
3.	The address of the initial registered office is:	720 W. Idaho, Suite 700, Boise ID 83701	
	and the name of the initial registered agent is:	J. Kevín West	
4.	Management of the professional limited liability	company will be vested in:	
	☐ Manager(s) ☑ Member(s)		
5.	5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.		
	Name	Address	
	Brandon L. Taylor, D.M.D.	10706 W. State Street. Star ID 83669	
	Scott E. Hayhurst, D.M.D.	10706 W. State Street, Star ID 83669	
6. Signature(s) of at least one person responsible for forming the limited liability company:			
	Signature 2000.		
	Typed Name Brandon L. Taylor, D.M.D.	Nc p65	
	Capacity Member	zation_2	
	Signature	— १५ के हुए IDAHO SECRETARY OF STATE	
	Typed Name Scott E. Hayhurst, D.M.D.	\$\frac{1}{2}	
	CapacityMember	CK: 28502 CT: 22597 BH: 645527 1 0 100.00 = 100.00 PROF LLC # 2	
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