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CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2015 NOV 19 AM 10:07

SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)

1. The name of the professional limited liability company is:

COMFORT CARE DENTAL OF REXBURG PLLC

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

3550 WASHINGTON PKWY IDAHO FALLS, ID 83404

(Street Address)

(Mailing Address, if different than street address)

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

CHRISTOPHER HANSEN

(Name)

332 BEULAHS LANE IDAHO FALLS, ID 83401

(Street Address)

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

Name

Address

CHRISTOPHER HANSEN

332 BEULAHS LANE IDAHO FALLS, ID 83401

PHIL HARPER

451 SUNTERRA DRIVE IDAHO FALLS, ID 83404

LAYNE HACKING

242 E. MAIN STREET REXBURG, ID 83440

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

3458 E 17TH STREET STE 140 IDAHO FALLS, ID 83406

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

Signature of a manager, member or authorized person.

Signature

Robert Crandall

Typed Name: ROBERT CRANDALL

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

11/19/2015 05:00

CK:3376058 CT:172099 BH:1501037

1@ 100.00 = 100.00 PROF LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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