

Signature: .

Signature:

Printed Name;

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE 2018 APR -6 AM 9: 01

> 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 duplicate.

	•	
1.	The name of the professional limited liability company is: Rickheim, DDS, MS, PLLC	
2.		
	1145 E Polston Ave, Post Falls, ID 83854	
	(Street Address)	
	(Malling Address, if different)	
3	Name and street address of registered agent in Idaho:	
₩.	Patrick Brent Rickheim	1145 E Polston Ave Post Falls, ID 83854
	(Nama)	(Adduss)
4.		
	Patrick Rickheim	1145 E Polston Ave
		(Audross)
	SPECIO	EASKEENS)
		- Standard work
	(Maue)	(Address)
5.	Mailing address for future correspondence (annual report notices):	
	1145 E Polston Ave, Post Falls, ID, 83854	
	(Address)	Tano, io, cook
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	ou to far all projects and out read to
•		
		Secretary of State use only
7.	Signature of a manager, member, or a	
Dein	nted Name: Joseph L McGrego	r) 04/06/2018 05:00

Rev. 11/2017

CK:17285768 CT:172099 BH:1636677 16 100.00 = 100.00 PROF LLC #2 16 20.00 = 20.00 EXPEDITE C #3

W199264