

## ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY



(Instructions on back of application)

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1.	The name of the professional limited liability company is:  MICHAEL A. BLOOM, DMD, PLLC			
2.	The professional LLC is organized for the pract	ice in the profession of:	DENTISTRY	
3.	The address of the initial registered office is:	110 E. Wallace Ave., Coeur d'	Alene, ID 83814	
	and the name of the initial registered agent is: _	PAUL W. DAUGHA	ARTY	
4.	Management of the professional limited liability company will be vested in:			
☐ Manager(s) ☑ Member(s)				
5.	<ol> <li>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.</li> </ol>			
	Name	Address		
	MICHAEL A. BLOOM, DMD	9928 N. Government Way, Hayden, ID 83835		
6. Signature(s) of at least one person responsible for forming the limited liability company:				
Signature Muhal a Blow 10m0				
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Si	gnature	ds of organiza		
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