



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 JUN 18 AM 8:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Dental Image, LLC.

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

1341 Greystone Drive, McCall, ID 83638

(Street Address)

P.O. Box 1569, McCall, ID 83638

(Mailing Address, if different than street address)

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

Randy A. Resimius

(Name)

1341 Greystone Drive,

(Street Address)

McCall, ID 83638

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

Name

Address

Randy A. Resimius

1341 Greystone Drive, P.O. Box 1569, McCall, ID 83638

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

P.O. Box 1569, McCall, ID 83638

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Randy Resimius

Typed Name: Randy A. Resimius

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
06/18/2013 05:00
CK: 4111 CT: 284431 BM: 1378561
1 @ 100.00 = 100.00 ORGAN LLC # 2

W126411