







STATE OF IDAHO Office of the secretary of state, Phil McGrane **CERTIFICATE OF ORGANIZATION LIMITED** LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0005433456

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day S descriptions below)	Service (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Professional Limited Liability Company
Entity name	Smith Dental PLLC
Profession	
The business is organized to practice the profess	sion of: Dentistry
2. The complete street address of the principal office is:	
Principal Office Address	3867 AMARILLO DR AMMON, ID 83406
3. The mailing address of the principal office is:	
Mailing Address	3867 AMARILLO DR AMMON, ID 83406-5142
4. Registered Agent Name and Address	
Registered Agent	Registered Agent Samuel Smith Physical Address: 3867 AMARILLO DR AMMON, ID 83406 Mailing Address: 3867 AMARILLO DR AMMON, ID 83406-5142
I affirm that the registered agent appointed h	nas consented to serve as registered agent for this entity.
5. Governors	
Name	Address
Samuel Smith	3867 AMARILLO DR AMMON, ID 83406
Signature of Organizer:	
Samuel Smith	10/05/2023
Sign Here	Date