



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Warner Law Offices Bankruptcy LLC

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

1037 E. Winding Creek Dr., Eagle, ID 83616

(Street Address)

(Mailing Address, if different than street address)

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

Shane K. Warner

(Name)

1037 E. Winding Creek Dr., Eagle, ID 83616

(Street Address)

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

**Name**

**Address**

Warner Law Offices PLLC

1037 E. Winding Creek Dr., Eagle, ID 83616

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

1037 E. Winding Creek Dr., Eagle, ID 83616

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature *Shane K. Warner*, member

Typed Name: Warner Law Offices PLLC

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised 07/2008

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08/04/2009 05:00  
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FILED EFFECTIVE