

Printed Name: _____

Signature: _

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

SECULE OF RESTATE

W173342

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplic

	Complete and subn	nit the application in <u>duplicate</u>	STATE OF BAHOTE
1.	The name of the professional limited liability company is: Dvorak Law, PLLC		
2.	The complete street and mailing addresses of the principal office is:		
	13601 W. McMillan Rd., Ste. 102-160, Boise, Idaho 83713		
	(Street Address)		
	(Mailing Address, if different)		
3.	Name and street address of registered agent <u>in Idaho</u> :		
	Wendy Cox Dvorak	5489 N. Beethove	en Ave., Meridian, Idaho 83646
	(Name)	(Address)	
4.	The name and address of at least one governor of the limited liability company:		
	Wendy Cox Dvorak	13601 W. McMilla	n Rd., Ste. 102-160, Boise, Idaho 83713
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	13601 W. McMillan Rd., Ste. 102-160, Boise, Idaho 83713		
	(Address)		
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:		
	La	ıw	<u> </u>
7.	Signature of a manager, member, or an organizer.		Secretary of State use only
1.	Wendy Cox Dvorak	•	IDAHO SECRETARY OF STATE
Pri	inted Name:		10/20/2016 05:00 CK:7401 CT:136842 BH:1551685
Siç	gnature: William CPt	while	10 100 00 = 100 00 PROF LLC #2
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Rev. 08/2015