

251



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 2010 AUG 23 AM 11:47

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Debt Assistance Professionals, LLC

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

301 Palmer Dr.

(Street Address)

Nampa, ID 83686

(Mailing Address, if different than street address)

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

L. Angel Granados

(Name)

301 Palmer Dr., Nampa, ID 83686

(Street Address)

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

Name

Address

L. Angel Granados

301 Palmer Dr., Nampa, ID 83686

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

301 Palmer Dr., Nampa, ID 83686

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: L. Angel Granados

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
08/23/2010 05:00  
CK: 499363 CT: 172899 BH: 1235872  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

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